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The Corporation

OF

The City of Capetown



ANNUAL REPORT

OF THE

Medical Officer of Health,

T. SHADICK HIGGINS,

M.D., B.S., B.Sc., Lond.; M.R.C.S., L.R.C.P., Lond.; D.P.H., Cantab.; Fellow of the Royal Sanitary Institute; Professor of Public Health, University of Capetown.

For the year ending 30th June, 1935.



Report of the Medical Officer of Health

FOR THE YEAR ENDED 30TH JUNE, 1935.

TO HIS WORSHIP THE MAYOR AND COUNCILLORS OF THE CITY OF CAPETOWN.

GENTLEMEN,

I have the honour to present the annual report on the health and sanitary conditions of the City of Capetown for the year 1934-35, together with an account of the work of the City Health Department during the year.

Vital Statistics.

The birth rate was the lowest yet recorded for the City, both for Europeans and non-Europeans.

The non-European birth rate was 2.7 times as great as the European, and, notwithstanding the greater mortality amongst non-Europeans, the natural increase (i.e., the excess of births over deaths) was 3.5 times as great in non-Europeans as in Europeans.

There was an increase in the general death rate in the year under review, the European death rate being 18 per cent. greater than that of the previous year (when both the European and non-European death rates were the lowest yet recorded), and the non-European death rate 8 per cent. This increase in mortality was to a great extent due to the prevalence of catarrhal conditions and measles, and was largely made up of deaths from bronchitis and pneumonia and from diseases of the heart and circulation.

The infant mortality rate also showed an increase compared with the previous year. The increase was 46 per cent. in Europeans and 9 per cent. in non-Europeans. Nevertheless these rates were lower than those of any former years except the two immediately preceding. The chief causes of the increased mortality were bronchitis and pneumonia, measles and congenital causes. The infantile mortality from diarrheal diseases was less than in any previous year.

The non-European general death rate and infant mortality rate were 2.2 and 2.9 times respectively greater than the corresponding European rates. These differences indicate the great amount of preventable mortality that takes place amongst non-Europeans. This is also shown by the fact that 60 per cent. of non-European deaths were of persons under 25 years of age, compared with 19 per cent. in the case of European deaths.

Infectious Diseases.

The great reduction that had occurred in recent years in the incidence of enteric fever was satisfactorily maintained.

Diphtheria was prevalent, there being more cases, both amongst Europeans and non-Europeans than in any recent year. Scarlet fever was also prevalent.

A serious epidemic of measles, which started at the beginning of 1934, was at its height from June to November, 1934. During the year under report there were 86 deaths from this cause, mostly in non-European children under five years of age. The death rate from measles was 5 or 6 times as great in the

non-European child population as in the European. There is a serious lack of hospital accommodation for this disease. The mortality from whooping cough was relatively low.

Reference has been made above to the great amount of mortality which occurred from bronchitis and pneumonia during the year under review. The deaths from these causes (903) exceeded those of the previous years by 294.

The undue prevalence of cerebrospinal fever in Capetown continues, especially amongst the non-Europeans. This disease is associated with conditions of overcrowding. Acute poliomyelitis (infantile paralysis) was also more prevalent than in previous years.

Tuberculosis.

The prevalence of tuberculosis is one of the most unsatisfactory features of the public health position in Capetown. Notwithstanding an expenditure by the Council and Government of £29,630 per annum the disease has shown no tendency to decline during the past 17 years. In the year under report the number of deaths and of new cases notified were somewhat less than in the previous year, especially in the case of non-Europeans.

The tuberculosis death rate in non-Europeans was 5.3 times as great as in Europeans. The cause of this difference, and of the excessive prevalence of the disease in Capetown, is to be found in the poverty, bad housing and other

associated social evils of a large section of the population.

In connection with the extension of the City Hospital for Infectious Diseases additional accommodation is to be provided for cases of tuberculosis.

A second tuberculosis clinic was opened in May, 1935, in premises specially

built for the purpose in Church Street, Wynberg.

The Public Health Amendment Act No. 57 of 1935, which came into operation on 1st July, 1935, reduces the burden of expenditure on tuberculosis by local authorities. Under the new Act such expenditure, instead of being the liability of the Union Government and local authority in equal proportions, is borne as to 50 per cent. by the Union Government, 25 per cent. by the Provincial Adminis-

tration, and 25 per cent. by the local authority.

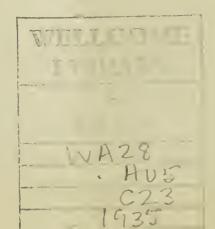
The Capetown City Council receives the full benefit of this change so far as its expenditure in connection with the treatment of patients at Nelspoort Sanatorium is concerned. On the basis of the 1934 expenditure its saving under this heading will be £1,890 per annum. But in regard to the rest of the expenditure on tuberculosis the full proportional part-refund payable under the new Act to other local authorities will not accrue to the City Council, to whom the additional part-refund will be reduced in the same proportion as the part-refund payable in former years was reduced through the operation of the £10,000 maximum limit imposed by Act No. 25 of 1932. The effect of this will be that, on the basis of the 1934 expenditure, the City Council will receive a further additional amount of £2,400 per annum instead of £4,520, which would have accrued if the new Act had not been subject to the limitation imposed by the 1932 Act.

Departmental Institutions.

The Council has adopted a scheme for the extension of the City Hospital for Infectious Diseases, which has been approved by the Minister of Public Health. The Union Government will contribute one-half of the capital cost. The scheme provides for new wards for 190 patients, accommodation for the necessary increase in staff, and other improvements. The building operations have

been begun since the end of the year under review.

The new cases that attended the infant consultations, and pre-natal, school, dental, tuberculosis and venereal disease clinics during the year numbered 19,722 and the total attendances at these medical sessions 161,846, as compared with 19,816 and 169,785 in the previous year. To the figure for attendances at the medical sessions (161,846) are to be added 33,100 "intermediate treatments" at the venereal disease clinics, and 117,073 attendances for dinners, 1,763 for test-feeds and 688 for remedial exercises, at the welfare centres; making a total of 314,470 attendances.



Housing.

The year was marked by the passing of the Slums Act, 1934, and the appointment of a special Committee of the Council to administer the Act. In addition to a few premises that have been dealt with by demolition or reparation, a series of slum areas have been brought to the notice of the Committee, and the Minister has approved of the acquisition of these areas by the Council, including premises which have been declared slums and other premises within the areas, with the object of demolition and reconstruction. These schemes are still in the stage of negotiation with a view to purchase. The details of the work initiated during the year under review are embodied in a section of this report.

The fundamental factor in the housing situation is the shortage of dwelling houses for the poorer classes, chiefly non-European but including also a section of the white population. This leads to slum conditions as the result of subletting and overcrowding in the town itself, and the occupation of insanitary hovels on the Cape Flats. The primary need is a great extension of the Council's operations in the way of the building of housing estates on vacant land. Although the worst of the slums can be dealt with under the Slums Act by acquisition, demolition and rebuilding, the provisions of the Act cannot be applied in a comprehensive manner until sufficient new houses have been provided to accommodate the population which would be dishoused if this were done.

Control of the Milk Supply.

New dairy regulations were drafted during the year under review, and have since been adopted by the Council and promulgated by the Provincial Administration. A summary of their chief provisions is set out in this report.

Mosquito Prevalence.

Special reference is made in this report to the nuisance caused by mosquitoes in certain parts of the Southern Suburbs.

Acknowledgments.

I desire to acknowledge the assistance I have received during the year from the members of the staff of the City Health Department and the support accorded me by the Chairman and members of your Health and Building Regulations Committee and Slum Clearance Special Committee and other members of the Council.

I am, Gentlemen,

Your obedient servant,

T. SHADICK HIGGINS,

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Fellow of the Royal Sanitary Institute.
Professor of Public Health, University of Capetown.
Medical Officer of Health.

City Health Department, 12, Keerom Street, Capetown. May, 1936.

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MUNICIPALITY OF THE CITY OF CAPETOWN.

LEADING STATISTICS, YEAR ENDED 30TH JUNE, 1935.

		European.	Non-European.	All Races.	European.
Area: 48,648 Acres.					
Total Population		147,733	145,516	293,249	
Population (excluding the tive locations of Langa N'dabeni)	and	147,700	141,560	289,260	
it dasom, it	• •	221,100	222,000	,	
		A	A	A	В
Birth rate		16.58	$44 \!\cdot\! 82$	30.40	$16 \cdot 76$
Death rate		10.84	$23 \cdot 73$	17.15	$11 \cdot 13$
Infant Mortality rate		50.8	$146 \cdot 2$	$119 \cdot 6$	$50 \cdot 6$
Tuberculosis Death rate		0.84	$4 \cdot 46$	$2 \cdot 61$	0.86
Enteric Incidence rate		$0 \cdot 22$	$0 \cdot 35$	$0 \cdot 28$	_
Enteric Death rate		0.04	0.06	$0 \cdot 05$	0.04

All the above rates are annual and expressed as per 1,000 population of each class, except the infant mortality rate, which is expressed as per 1,000 births occurring during the year. The figures for the native locations of Langa and N'dabeni are excluded from these rates.

A. Corrected for outward transfers.

B. Corrected for outward and inward transfers.

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR ENDED 30TH JUNE, 1935.

For the purposes of this Report, the year consists of 52 weeks ended 28th June, 1935. All rates have been corrected to the basis of a year of 365 days.

SECTION I.—NATURAL AND SOCIAL CONDITIONS.

PHYSICAL GEOGRAPHY.

Capetown is situated at the northern end of the Cape Peninsula. The Peninsula lies off the west coast of the mainland of South Africa, extending from north to south a distance of about 33 miles and attaining a maximum width of about ten miles. Its average east and west width may be estimated at five miles. The northern half of its eastern side is connected with the mainland by a wide low-lying sandy isthmus, known as the Cape Flats, which separates Table Bay to the north-west from False Bay to the south-east. The narrowest part of the isthmus measures from sea to sea about twelve miles.

The backbone of the Peninsula is a mountain range which extends from Table Mountain (3,495 ft.) at its north end to Cape Point at the south. The land slopes from the mountains to the sea or, where the isthmus joins the Peninsula, to the Cape Flats. While much of the Peninsula area lies at heights of over 1,000 ft., most of the isthmus does not reach 100 ft., and a rise of sea level to that amount would convert the Peninsula into two islands nearly equal in area.

There are three principal formations functioning in the simple geological* structure of the Peninsula: viz., (1) the Table Mountain Sandstone series, beneath which is found (2) the granite, intruding into (3) a series of dark-coloured finegrained sediments called the Malmesbury Slate Series.

The Malmesbury Series is found at the northern end of the Peninsula and constitutes the mountain mass known as Signal Hill and Lion's Head (except the summits) and also Devil's Peak. It forms the foundation of Green and Sea Point, Capetown proper, Woodstock and Salt River, and Mowbray. In some places the beds of clay, resulting from the weathering of this rock, extend to a depth of several yards and are used extensively for brick-making.

The Table Mountain Series constitutes the higher part of Table Mountain, and almost the whole southern two-thirds of the Peninsula, where its lowest beds descend below sea level.

The granite forms the basement of nine-tenths of the Peninsula area. It constitutes the lower slopes of Table Mountain south of Sea Point on the western side and south of Rondebosch on the eastern side.

Resting on the lower slopes of the mountains is a talus apron consisting of a mixture of sand, clay and boulders.

From the bottom of the slope below the face of Table Mountain there extends down to Table Bay a bed of alluvial deposits, on which a good deal of old Capetown is built. At the shore of the Bay there is a considerable area of land that has been reclaimed from the sea by the deposit of town refuse.

The Cape Flats are covered with a layer of sand varying in depth and containing in places a few feet beneath the surface a layer of ferruginous rock sometimes called "Cape laterite" and known locally as "ironstone gravel." The laterite consists of a limonitic matrix which encloses sand, clay and rock fragments. It varies in thickness from a few inches up to say ten feet and generally rests on a few feet of sandy clay, which in turn lies upon the underlying hard rock, which may be either granite or slate.

^{*} The geological particulars in this section are taken from "Chapman's Peak" Guide Book of International Geological Congress, XV Session, South Africa, 1929, by Prof. Andrew Young, D.Sc.

The greater part of the Municipality is built upon the Malmesbury slate or granite, the sandy Cape Flats, and alluvial deposits. On the coast of False Bay the town from Muizenberg to Kalk Bay is built on the Table Mountain sandstone or on the talus and sand dunes covering the sandstone slopes.

The City of Capetown consists of a central portion, which before the City extension of 1913 constituted the whole Municipality and is sometimes known as Capetown proper or central Capetown (Wards 2-7), and a chain of suburbs on either hand. The central portion lies in the amphitheatre which, extending down to Table Bay towards the north-east, is backed on the other sides by the precipitous face of Table Mountain, which forms the northern end of the Table Mountain range, and the outlying masses, Devil's Peak on the east and Lion's Head and Signal Hill on the west. It therefore lies between the mountain and the sea, and, unlike the centre of most cities, is not surrounded by its suburbs.

The suburbs extend beyond this amphitheatre on either hand. To the west, the marine suburbs, known as Green Point, Sea Point, Clifton, Camps Bay and Bakoven (Ward 1 and part of Ward 4) lie along the Atlantic sea board for a distance of about six miles curving with the coast in a southerly direction. They are on the seaward slopes of Signal Hill and Lion's Head.

To the east the "Southern Suburbs" (Wards 8-10 and 12-15) extend around Devil's Peak and are stretched for about sixteen miles along the road and suburban railway line which after rounding Devil's Peak pass along the eastern side of Table Mountain in a southerly direction to the shore of False Bay. Woodstock and Salt River (Wards 8 and 9), next to Capetown proper, slope down to Table Bay, and at the other end Muizenberg, St. James and Kalk Bay (Ward 14) lie on the False Bay coast. The string of suburbs between, known successively as Observatory, Mowbray, Rosebank, Rondebosch, Newlands, Claremont, Kenilworth, Wynberg, Plumstead, Diep River, Heathfield, Retreat and Lakeside, lie on the eastern slopes of the mountain range, and, to a greater extent, on the Cape Flats below them. The Municipality extends over the Flats to a varying depth up to $4\frac{1}{2}$ miles, and the parts on the Flats contain a number of scattered townships and estates, some of which are served by the Cape Flats railway, which forms a loop lying in a more easterly position than the suburban line.

There is an extension of the Municipality beyond Salt River in a north-easterly direction on the Flats bordering Table Bay. This, known as Ward 11, includes the suburbs of Maitland, Brooklyn, Rugby and Kensington.

CLIMATE.

Capetown is situated Lat. 33° 56′ S., Long. 18° 30′ E. Its climate is largely determined by the fact that during the summer season the prevailing winds are south-easterly and in the winter season north-westerly; and that the western shore of the Cape Peninsula is washed by a cold current from the Antarctic.

There is an average of nearly three thousand hours of bright sunshine per year, and the temperature is very equable. The rainy season is the winter, but occasional showers occur in the summer also.

The parts of the Municipality on the two sea boards are much frequented by holiday makers from other parts of the country. To the attractions of the climate are added the great natural beauties of the Peninsula and its neighbourhood.

The meteorological readings for the year under review and for previous years will be found in Tables K to O on pages 137 to 141.

From the point of view of public health Capetown belongs definitely to the temperate zone, and tropical diseases, except in imported cases, are entirely absent. The state of health and the mortality statistics of the European part of the population are much the same as in a healthy European town.

SOCIAL AND ECONOMIC CONDITIONS.

One half of the Capetown population of nearly three hundred thousand consists of whites, or "Europeans." The other half is commonly designated as "Non-Europeans," though they have a large admixture of white blood. Nine-tenths of these non-Europeans are of the mixed race known as Cape Coloured.

The Cape Coloured are largely the descendants of the slaves of earlier days, whose emancipation was completed in 1835. Their ancestors of the eighteenth

century and earlier were mainly Europeans, Hottentots, blacks from Mozambique, Madagascar and other parts of Africa, and East Indians from the Dutch East Indies. In more recent years they have received additions from European, Bantu and other stocks.

There is one section of the Cape Coloured, Moslem in religion, known as "Malays," who are more immediately descended from the Dutch East Indians. Though they possess a larger infusion of this strain they are much mixed with the other elements present in the Cape Coloured generally.

The remaining one-tenth of the non-European population consists of Bantu natives, and Indians, mostly Moslems, from British India. They are both comparatively new comers. There is a tendency on the part of the Indians to intermarry with the Malays.

The social and economic conditions of the Cape Coloured are on the whole unsatisfactory. The principle of compulsory education, which is applied to European children, does not extend to them; and although certain schooling facilities are available for them, in many cases of an inferior order, there is much illiteracy, and also a lack of discipline in certain classes of adolescents. With a very few exceptions they belong to the working class. A small proportion have skilled trades and receive satisfactory wages, but the majority belong to the unskilled labouring class. These receive very low wages, usually not more than 30s. a week when in full work, and often less. The City Council pays its labourers a minimum wage of $\pounds 2$ a week, but this is much above the local standard of wages. In the building trade a minimum wage of $\$ \frac{1}{2} d$. an hour has been fixed for labourers. The wages of the head of the household are commonly eked out by the earnings of their wives and children.

The resulting poverty produces its inevitable result amongst the coloured people. A large section of them suffer from malnutrition and their housing conditions are very bad. Alcoholism is common and there is a high incidence of venereal disease amongst them. The effects on their health are shown by the contrast between the vital statistics of Europeans and non-Europeans.

An entirely different picture is presented by the European population as a whole, which in the main is a well-to-do community. A portion of them, however, have an ordinary working-class status, and there is a small section which has sunk to the same social and economic level as the coloured people. Nevertheless the white population presents decidedly favourable health statistics.

There are certain parts of the City where the inhabitants are mainly non-European, and other parts are exclusively occupied by Europeans and their coloured servants. Generally speaking, however, the various sections of the community are to a great extent intermingled, and there is nothing approaching segregation of the races.

The natives are partly housed in the Council's native locations, and partly live as ordinary non-European residents. The segregation prescribed by the Natives (Urban Areas) Act, 1923, is by no means completely enforced. A certain section of the natives are men from the native territories, who still retain their link with the territories and commonly return there eventually. There are also a large number of detribalized natives, who are permanently resident in Capetown and live here with their families. Their social and economic conditions are on the whole somewhat worse than those of the coloured people.

The Indians are comparatively small in number. Many of them are petty traders, and on the whole they are better off than the Cape Coloured. They have a low standard of living. A section of them is making good progress in business and becoming well-to-do.

Distress amongst Europeans and non-Europeans is dealt with by the Board of Aid (see below). There is no system of compulsory insurance against sickness and unemployment. Old age pensions are granted by the State to the aged poor.

In the annual report for the year 1930-31 quinquennial statistics for the five years ended that year are given. The general death rate in non-Europeans was 2.4 times as great as in Europeans, the infant mortality rate 2.7 times and the tuberculosis death rate 6.1 times. Similar differences appeared when the Europeans

pean populations of the different wards were compared. The four wards with the lowest European mortality rates in the quinquennium were Kalk Bay (14), Sea Point (1), Park (5) and Kloof (4); and the highest, Castle (7), Harbour (2), West Central (3) and Woodstock (8). The European general death rate in the latter was 1.7 times as great as in the former, the European infant mortality 1.8 times and the European tuberculosis death rate 3.0 times. The corresponding figures for the current year are contained in the present report (Table D on page 130). 60 per cent. of non-European deaths this year were of persons under 25 years of age: the corresponding figure for Europeans was 19 per cent.

Housing.

Fundamentally the housing conditions in Capetown are similar to those of western European towns. The bulk of the City consists of houses built of brick or stone, served by water-carriage sewerage and a good municipal water supply. The streets and back-lanes are well constructed. It is only in certain of the outlying estates on the Cape Flats that wood-and-iron houses are found and such services are not provided. But owing to poverty and the housing shortage there are a few thousand non-Europeans living in unauthorized insanitary shacks in the outskirts of the Municipality, often hidden in the bush. The practice of selling plots of land to poor people on the hire-purchase system encourages these conditions.

But though the bulk of the population lives in houses that are decently constructed and serviced, there is gross overcrowding in a proportion of these as a result of poverty and the shortage of houses.

The number of new dwelling houses built in the Municipality (abstracted from the City Engineer's returns) as compared with the growth of population is shown in the following table:—

	Estimated	Buildings for
	increase	human habi-
Year.	in	tation com-
	population.	pleted (dwellings).
		(dwellings).
1915	3,980	123
1916	4,110	103
1917	4,240	99
1918	4,380	69
1919	4,500	91
1920	4,680	139
1921	5,340	210
1922	4,950	308
1923	5,080	425
1924	5,220	561
1925	5,380	335
1926	5,320	444
1927	5,910	675
1928	6,060	846
1929	6,230	1,773
1930	6,400	1,320
1931	6,560	1,564
1932	6,730	1,102
1933	6,900	1,068
1934	7,080	1,711
1935	7,280	1,937
TOTAL	116,330	14,903

Wynberg incorporated in Municipality in 1927.

It will be seen that there has been a striking acceleration in the building of dwelling houses since the Great War and the years immediately following, when such work had almost ceased. The number of dwellings completed in 1935 was greater than in any other year in the series shown.

From the 1926 census returns it appears that the average number of persons per dwelling in the City of Capetown (excluding Wynberg) was 6·126. For the Municipality of Capetown and Wynberg (unified in 1927) the figure was 6.068. The new dwellings built during the years 1915-1928 were 6,850 less than the number needed to maintain the average number of persons per dwelling at this census figure; but during the years 1929-35 the shortfall was overtaken by 2,700, so that over the twenty-one years the new dwellings built were 4,150 less than the number needed to maintain the census figure. This shortfall will be progressively reduced if the present rate of building is maintained. It is, however, increased by the demolition of existing houses and the conversion of dwelling houses to other purposes. No account is taken of this factor in the figures cited above. The average number of persons occupying new dwellings built is probably considerably less than six, and the houses needed by the people constituting the increase in population may be estimated as exceeding the number of dwellings actually built by about eight thousand rather than four thousand.

Reference has frequently been made to the overcrowded and insanitary conditions under which much of the coloured population and certain of the poorest of the Europeans are living. Houses that afford reasonable accommodation for one family only are sublet to more than one family, and in many cases whole families are living in single rooms. In a survey (1931) of an area in central Capetown inhabited by a population of 45,855, of whom 91 per cent. were Europeans, more than one-half of the population were found to live in single-room lettings (see annual report for 1932): and in an area in Woodstock and Salt River (1933) inhabited by a population of 21,952, of whom 64 per cent. were non-Europeans, the proportion living in single-room lettings was about one-third. Reference may be made to the report on coloured housing in Capetown made by Mr. C. W. Cousins, Director of Census, based on the data obtained in the 1921 census (see Annual Report of the Medical Officer of Health for 1923-24). Subletting and overcrowding, the direct result of the housing shortage, are the main cause of slum conditions in Capetown.

The extensive building operations reflected in the table set out above, with the exception of the non-European housing operations of the City Council, have had very little effect in relieving the shortage of non-European houses. The houses built have been in the main for the better-off classes of the community. It is because private enterprise is not meeting the housing needs of the poor that the obligation to undertake housing schemes has fallen upon the City Council.

The houses and flats built by the City Council since 1920, up to 30th June, 1935, including 472 built by the Citizens Housing League Utility Company, number 3,006. Of these 1,436 are for Europeans and 1,570 for non-Europeans; 2,392 are for letting at economic rentals and 614 sub-economic.

During the year ended 30th June, 1935, the following houses were built by the Council under the municipal housing schemes:—

	No. of Houses.	
Assisted Housing (in brick)	2	£1,310
Bokmakirie Township (third and final section)	160	40,810
Total	162	£42,120
	-	

During the year under review an important extension of the machinery for dealing with slum conditions was made by the passing of the Slums Act, 1934. Reference is made elsewhere to the work done under this Act (see page 77).

UNEMPLOYMENT.

Mr. R. Beattie, Divisional Inspector of Labour, has kindly supplied the following figures of the work of the Labour Department for the year under review, in respect of the whole Cape Peninsula, showing month by month the number of

unemployed persons applying to be put on the books, vacancies referred by employers to the Labour Department and vacancies filled:—

THE RESIDENCE OF THE PROPERTY	yerandikana. 1777 bir di James et a 1	nerstander sicht der setten der Leiter					
Month.	Applie	ations.		nds by	Vacancies Filled.		
Month.	Eur.	Non-E.	Eur.	Non-E.	Eur.	Non-E.	
1934 :							
July	1,324	1,107	201	66	199	62	
August	1,129	1,026	107	57	107	57	
September	1,074	1,199	96	219	91	219	
October	921	925	102	129	102	129	
November	1,026	736	119	54	113	52	
December	868	559	122	82	112	73	
100~							
1935:	1 400	1 400	150	105	1.47	177	
January	1,488	1,462	150	187	147	177	
February	1,144	1,151	83	$\begin{array}{c} 122 \\ 207 \end{array}$	$\begin{array}{c} 83 \\ 154 \end{array}$	$\begin{array}{c} 120 \\ 203 \end{array}$	
March	1,257	1,196	$\begin{array}{c} 155 \\ 327 \end{array}$	$\begin{array}{c} 207 \\ 214 \end{array}$	$\frac{134}{327}$	$\begin{array}{c} 203 \\ 211 \end{array}$	
April	1,038	1,144	$\begin{array}{c} 327 \\ 217 \end{array}$	116	217 a	$\frac{211}{115}$	
May June	1,039	997	166	109	166	$\frac{113}{106}$	
June	011	991	100	109	100	100	
Totals	13,185	12,413	1,845	1,562	1,818	1,524	
Totals for 1933-1934	16,317	13,294	2,091	1,580	2,072	1,552	
Totals for 1932-1933	18,809	15,967	2,121	1,419	2,115	1,416	
Totals for 1931-1932	14,160	11,939	1,640	758	1,638	749	
Totals for 1930-1931	12,466	13,088	1,634	1,224	1,629	1,189	

Poor Relief.

Board of Aid.

Defective nutrition is one of the most important factors in the causation of tuberculosis and other forms of disease, and an adequate system of relief of distress is to be regarded as of prime importance in the prevention of disease.

Poor relief in the City of Capetown is administered by the Capetown General Board of Aid, instituted under the Poor Relief and Charitable Institutions Ordinances of 1919 and 1924. The Board consists of nine members, including the Mayor of Capetown, ex officio, and three members of the City Council; together with co-opted members.

Its funds are provided by the Provincial Administration and the City Council, supplemented to a small extent by voluntary donations.

The Secretary of the Board has kindly supplied the following statistics for the calendar years 1934 and 1935:—

	19	34.	r gartin dan dan sama ya saka dan da gartin da sama da gartin da sama da gartin da sama da gartin da sama da g	1935.			
Income from voluntary sources Subsidy from Provincial Administra-		£ 140			£ 122		
tion		13,320 13,320		13,345 13,345			
of administration costs)		21,774	, <u> </u>		19,793		
	Keeron Street Office.		Wood- stock and Maitland Office		and	Wood- stock and Maitland Office.	
Reports by Board's Visitors	21,910 4,657 19,003	2,604	18,402 3,989 12,116	15,694 4,141 21,175	12,681 2,207 19,490	13,739 3,641 16,814	
Daily number of cases dealt with			72	73	117	10,814	

The Board of Aid maintains shelters for families who are homeless through lack of means for paying rent. The shelter for Europeans, at the old Police Station buildings at 7-11, Wale Street, Capetown, accommodates about 100 persons, practically all in families with children; and the shelter for non-Europeans at the old Police Station, 40, Sir Lowry Road, Capetown, accommodates about 90 persons in families. There is, however, still a great need for accommodation for destitute persons, both sick and otherwise, that require dealing with on indoor lines. A limited amount of accommodation for the sick and aged is provided at the Capetown Infirmary under the Provincial Administration.

At the European shelter, 7-11, Wale Street, the Board of Aid maintains a day nursery for European children, which was opened on 4th February, 1935. The full capacity of the day nursery is 50 but until the end of the year under report it was only partially full.

Provision of Food for Mothers and Children.

Free dinners are provided at the Maternal and Child Welfare Centres for nursing and expectant mothers and children under school age who are suffering from undernourishment as the result of poverty. The dinners are given at all of the nine centres on Mondays to Fridays inclusive. The recipients are selected on medical grounds from the attendants at the centres. The figures for the year under report are shown on page 69. The dinners given numbered 117,073 (nursing and expectant mothers 32,513 and children 84,560). In the calendar year 1935 the dinners provided cost 2.7d. per dinner, including the cost of food, extra staff engaged, and part-cost of fuel, but not the wages of ordinary staff who help with the dinners. The services of the mothers themselves are utilized as much as possible.

Dried milk for bottle-fed infants is issued at the welfare centres. The mothers are charged cost price if they can afford to pay; otherwise the dried milk is supplied at a reduced price or free. In the year ended 30th June, 1935, 1,629 new cases were supplied with dried milk and 36,134 lbs. of dried milk were issued, as well as 1,495 pints of new milk. The cost was £2,179, and the takings from mothers in respect of dried milk, new milk and medicines, amounted to £644 10s. 9d. (see page 71). As the result of this provision no suckling infant in the Municipality need lack its normal diet on account of poverty.

Relief Works.

In connection with relief works instituted by the City Council, employment was given during the year ended 30th December, 1935, to an average number of 31 men. The total expenditure of the Council under this heading was £4,561 15s. 2d., of which £1,323 16s. 3d. was paid in wages. The Government repaid to the Council in the form of subsidy £502 10s. In 1934 the corresponding expenditure of the Council was £51,898.

In view of the improved trade position and the consequent decline in unemployment no collection or distribution of funds corresponding to that undertaken in the previous year by the Citizens Unemployment Relief Committee was made in the year under report.

Committed Children.

Government grants in respect of "committed children" are given at the discretion of the magistrate. These grants do not exceed £2 per month for European children and £1 per month for non-European. They are distributed by the Society for the Protection of Child Life, and during the year ended 30th June. 1935, the money paid out amounted to £13,111 5s. 8d. Maintenance orders for 414 children were granted, 888 renewed, 19 cancelled and 2 refused, the total number of "committed children" under the care of the Society during the year being 1,424 (200 European and 1,224 non-European). The maintenance money is administered partly as mothers' pensions, for women whose husbands have died or become permanently incapacitated, so that the home can be kept together by the natural guardian of the children; and partly as grants for orphaned children who have no relatives in a position to maintain them.

 $Non ext{-}Support.$

The Non-Support offices at the Magistrate's Courts operate in connection with children whose fathers are ordered by the court to make regular payments in support. The fathers are required to make their payments to these offices instead of to the mothers personally. During the year ended 30th June, 1935, £12,978 1s. 10d. was received from the fathers by the office of the Capetown Magistrate and during the year ended 31st December, 1935, an amount of £83 was received by the Simonstown Magistrate in respect of the part of his magisterial area that falls within the Capetown Municipality. The Wynberg Magistrate in the year ended 31st December, 1935, received approximately £3,116 8s. 8d. in respect of the whole of his area, which is not entirely within the Capetown Municipality.

MEDICAL RELIEF (OUTDOOR).

The City Council provides medical attention in their own homes for indigent sick persons needing such service. The work is carried out by a full-time medical officer appointed in the City Health Department. The appointment is for a period of six months and is intended for junior practitioners who have completed house appointments in the general hospitals. Arrangements for the supply of medicines, etc., are made with the Capetown Free Dispensary and the Woodstock Hospital, and with local chemists. This work is carried out in co-operation with the District Nursing Organization.

The visits made by the medical officer during the year ended 30th June, 1935, were as follows:—

;; ;; ;; ;;	1	99 152 309 40 614	Ward 9 , 10 , 12 , 13 , 14 15	29 156 289 166 106
	7 8	559	,, 15 Not allocated	
			Total 3	,336

In the previous year the number of visits was 2,235.

Under the City of Capetown Additional Poor Relief Ordinance, No. 5 of 1932, the Provincial Administration pays the Council part-refund of one-half of the cost of this service.

Hospitals, Convalescent Homes, Dispensaries and District Nursing.

Certain of the hospital facilities of the City are provided by the City Council, including the City Hospital for Infectious Diseases, the clinics for Tuberculosis and for Venereal Diseases, and the native hospitals at Langa and N'dabeni. Particulars in regard to these, and also the Council's maternal and child welfare centres, are embodied in this report. The Capetown Infirmary is maintained by the Provincial Administration. Otherwise, the hospital services in the Cape

Peninsula are administered by the Cape Hospital Board.

The Hospital Board serves the areas of the Capetown Municipality and of the Cape Divisional Council with the urban areas included therein. It is composed of eighteen members, of whom three are appointed by the Administrator, three by the honorary medical staff, six by the local authorities, and six by the registered contributors. The Capetown City Council has two representatives. The Board obtains its funds from voluntary sources, contributions from the local authorities concerned, and the Provincial Government subsidy. In the year ended 31st December, 1934, the expenditure of the Board amounted to £142,800, of which £36,923 was contributed by local authorities, viz., £19,296 by the Cape Divisional Council, £17,466 by the City Council, £120 by the Simonstown Municipality, and £41 by the Durbanville Municipality. The contribution of the City Council in-

cluded £750 towards the maintenance of an ambulance service for street accidents, etc. The patients treated by the hospitals and other services controlled by the Board are drawn from districts without as well as within the City of Capetown, and the extent of the work is indicated by the following tables, extracted from the annual report of the Board for the year 1934-35.

COMPARATIVE TABLE OF BEDS AVAILABLE AND IN-PATIENTS
TREATED.

	r d							P.	ATIENT	S							
	Beds.	lst										in 31st 1934.			Percentages		
lnstitution.	Nominal Roll of	Remaining in Hosnital at 31st	December, 1933.	Admitted	during 1934.	Total under	Treatment.	Discharged	during 1934.	Died during	1934.	Remaining in Hospital at 3	December, 19	Total.		Part-paying.	Paying not less than 7/6 per day.
	ž	E.	C.	E.	C.	E.	C.	E.	С.	Ε.	C.	Ε.	С.	To	Free.	Pa	Pa th
Somerset Hos	308	149	133	2,834	2,461	2,983	2,594	2,667	2,274	177	182	139	138	5,577	76 .65	11 · 85	11.50
Woodstock Hospital	64	41	25	1,068	673	1,109	698	1,000	5 85	67	80	42	33	1,807	54 ·40	16 .93	28.67
Rondebosch and Mowbray Hos.	54	33	18	647	285	680	303	626	267	24	21	30	15	983	41.91	20.96	37 ·1 3
Wynberg (Victoria) Hospital	105	31	58	903	1,051	934	1,109	852	939	43	109	39	61	2,043	6 3 · 34	14 .73	21.93
False Bay Hospital	28	12	10	342	271	354	281	332	246	15		7	14	635	$61 \cdot 42$	19 .53	19.05
Peninsula Mater- nity Hospital	32	7	14	330	683	337	697	323		5	11	9	18				2 .61
Lady Michaelis Homo	35	19	. 4	59	33	78	37	61	29			17	8	115	52.17	45.22	2.61
Totals	626	292	262	6,183	5,457	6,475	5,719	5,861	5,008	331	424	283	287	12,194	61 · 37	21.22	17.41
Eaton Conva- lescent Home McGregor Conva-	66	17	28	501	460	518	488	493	456			25	32	1,006	83 · 30	16 .70	••
lescent Home	28	30		508		5 38		505				33		538	55 .95	44.05	• • •
Princess Alice Home	60	26	30	31	18	57	48	21	19			36	29	105	66 · 67	3 3 · 33	
Totals	154	73	58	1,040	478	1,113	536	1,019	475			94	61	1,649	73 ·32	26.68	

E. signifies European.

C. signifies Coloured.

Table of Daily Units, Daily Average of Patients, and Daily Average Cost OF Patients compared with 1933.

Institution.		Number of	Out-Pa		Daily A Nun of In-P	nber	Average Daily Cost per In-Patient.		
4	1934	1933	1934	1933	1934	1933	1934	1933	
1. Somerset Hospital	109,746 24,473 18,763 37,163 9,909 10,318 10,814 19,722 10,457 22,274	109,614 23,981 18,013 37,196 9,518 9,714 5,924 17,750 9,673 14,845	53,947 18,929 1,381 8,934 2,647 9,249	52,632 20,663 1,308 6,123 3,489 7,465	300 · 67 67 · 05 51 · 40 101 · 82 27 · 15 28 · 27 29 · 63 54 · 03 28 · 65 61 · 02	300 ·31 65 ·70 49 ·35 101 ·90 26 ·07 26 ·61 17 · 74 48 ·63 26 ·50 40 ·67	s. d. 10 6·92 8 10·11 7 8·99 7 6·57 7 6·72 11 6·73 6 0·94 3 4·14 3 8·13 3 4·37	s. d. 10 2 · 52 8 4 · 14 8 2 · 22 7 0 · 45 8 2 · 26 11 10 · 29 7 11 · 69 3 7 · 22 4 2 · 08 4 4 · 10 . ·	

The work of the District Nursing Organization is of great importance in the local health scheme. On the 31st December, 1934, there were 30 district nurses and a superintendent engaged in it. Twenty-one of the district nurses work in the area of the Capetown Municipality.

St. Monica's Maternity Home.

This institution, at 182, Bree Street, Capetown, under the auspices of the Diocesan Board of Missions of the English Church, provides maternity services, chiefly for non-Europeans, both intern and extern, and maintains a midwifery training school for non-Europeans.

During the year 1935 508 cases were attended, 325 as in-patients and 183 on

the district.

Twelve new pupil-midwives entered for training during 1935.

A pre-maternity ward is maintained for patients needing observation and treatment. Cases of this nature are referred from the municipal pre-natal clinics, the City Council making a grant of £250 per annum for this service.

Pre-natal clinics and an infant welfare clinic are held for the patients of the

institution.

The funds are obtained chiefly from the Provincial Administration, the City Council, the Union Health Department, and the Community Chest.

Duinendal Tuberculosis Settlement.

The Care Committee for Tuberculous Patients maintains a settlement for European male tuberculous patients at Duinendal farm on the Cape Flats, made available through the generosity of Captain W. D. Hare. The patients received are chiefly those who have received treatment at Nelspoort Sanatorium or the City Hospital and whose home conditions are not favourable for ultimate recovery. Occasionally patients are admitted who are awaiting admission to sanatorium. Some degree of vocational training is undertaken. Most of the cases are from the City of Capetown, and the work is carried out in close co-operation with the City Health Department (see page 46). The funds are derived mainly from the City Council, the Provincial Administration, the Cape Divisional Council and the Community Chest.

The cases dealt with have been as follows:

			Year ended
	318	st March,	31st March,
			1936.
In residence at end of year		11	11
Admitted during year		18	19
Discharged during year		18	19

Sunshine Home for Children.

The Association for the Prevention of Consumption maintains at Lincoln Street, Bellville, a holiday home for 24 European children in a depressed state of health, especially tuberculosis contacts. The object is to build them up and strengthen them so as to withstand the danger of developing tuberculosis. Most of the cases are from the City of Capetown, and the work is carried out in close co-operation with the City Health Department. The funds are derived mainly from the Christmas Stamp Fund, the Provincial Administration, the Union Health Department and the City Council, and from street collections.

During the year ended 31st October, 1935, 85 children were admitted. The average period of residence was 92 days, the longest stay during the year being

259 days and the shortest 20 days.

Maitland Cottage Homes.

In three cottages at the Maitland Garden Village the Capetown Society for the Protection of Child Life maintains a home for 25 non-European orthopædic cases, chiefly tuberculous in nature. The cases are mainly from Capetown. The funds are obtained as Union Government grants in respect of individual children and from voluntary contributions.

The home is run in connection with the Invalid Children's Aid section of the Society's work.

The cases dealt with in the year 1935 were as follows:—

In residence at beginning of year	23
	91
Discharged during year	74
Died during year	2
In residence at end of year	38

Chronic Sick Hospital.

At the Capetown Infirmary, which is maintained by the Provincial Administration for sick and infirm poor persons in the Cape Province, there is accommodation for 505 beds. On the 30th June, 1935, the number of patients in the hospital was 468 (European males 164, non-European males 137; European females 74, non-European females 93). These cases are, to a great extent, chronic in nature. In the year ended 30th June, 1935, the number of new cases admitted from Capetown was 165, and from other parts of the Cape Province 25.

OTHER NON-MUNICIPAL HEALTH SERVICES.

There are four medical inspectors of schools and eight nurses to serve the Cape Province. No treatment is undertaken by the school medical service. On page 73 reference is made to the school clinic held at certain of the Council's maternity and child welfare centres.

The health administration of the Port of Capetown is controlled by the Union Health Department.

The administration of the Food, Drugs and Disinfectants Act is shared by the Union Health Department and the City Council.

DRAINAGE, SEWERAGE AND SCAVENGING.

STORMWATER DRAINAGE.

A great part of the Municipality, being built on the slopes at the foot of the mountain, is well placed for drainage. This applies to Capetown proper and the suburbs. But on parts of the Flats the natural drainage is bad and in the wet season the ground water level over a considerable area is very near the surface. In some portions there is standing water during much of the winter.

The town is sewered on the "separate" system, stormwater being taken by separate channels to the nearest natural outfall, whether the sea or the Liesbeek and Black Rivers and their tributaries, which drain the "southern suburbs" north of Kenilworth and flow into Table Bay as the Salt River. South of Kenilworth the streams discharge into a series of vleis.

SEWERAGE.

Except a few outlying areas the whole of the built-up part of the Municipality is provided with water-borne sewerage.

The sewage from the area of the old municipalities of Capetown and Green and Sea Point (Wards 1-7) is discharged into the sea near Green Point Lighthouse by means of a submerged steel outfall at a depth of 55 feet below sea level approximately 2,000 feet from the shore.

The sewage from Wards 8-13 (Woodstock, Salt River, Maitland, Mowbray, Rondebosch and Claremont) is treated at the disposal works and sewage farm at Athlone, from which the effluent passes into the Black River.

From the Wynberg area (Ward 15) the sewage is treated by broad irrigation

near Zeekoe Vlei.

The sewage from the Kalk Bay—Muizenberg area (Ward 14) is discharged on the sand dunes on the False Bay shore about two miles from Muizenberg.

In the Camps Bay area the sewage passes into treatment tanks from which the effluent is discharged to the sea by a short submerged outfall.

The construction of a drainage scheme for Clifton is well in hand and the date of its completion will be limited to the time in which the necessary pumping machinery can be imported and installed.

Sewerage extensions are urgently needed in several parts of the Municipality, including Athlone, Lansdowne, Plumstead-Diep River, Kensington and Lakeside. The Medical Officer of Health submitted a report in August, 1934, indicating that the areas needing sewerage comprised 4,344 dwelling houses, shops and other occupied buildings (Ward 12, 1,790; Ward 13, 962; Ward 15, 779; Ward 11, 490; and Ward 14, 323).

PAIL CLOSETS.

The City Engineer's Department undertakes the weekly collection of stercus in the outlying unsewered areas. In parts of the Cape Flats this work is carried out with great difficulty owing to the lack of roads. The men and wagons have to plough through heavy sand and bush, and, in winter, through water, to reach isolated places for the purposes of collecting. In these circumstances oxen are employed for transport and the work is carried out in the day time. Elsewhere it is done by mules at night. A charge of 7s. 6d. is made for the first installation of a pail but no charge for removals and renewals.

The stercus collected in the various districts is buried in trenches on municipal land at Vyge Kraal, the old sewerage farm at Wynberg Flats and the Raapkraal Farm, Retreat, and passed into the sewers at depositing depôts at Maitland, Kenilworth and Clifton.

The number of premises from which stercus was being removed at 30th June, 1935, is shown by the following figures:—

,	Premises.
Clifton	116
Camps Bay	18
Woodstock and Salt River	20
Maitland and Brooklyn	260
Kensington	458
Added areas, Mowbray to Claremont	2,584
Claremont	9
Wynberg	1,020
Muizenberg and Retreat	452
	4,937

At Plumstead, Diep River, Clovelly and Kalk Bay, the O'Brien dry earth closet is in use, the service, including removals, being undertaken by a private firm as contractors to the Corporation. Householders are required to provide the closet, and the removals are paid for by the Corporation. Ordinary pail closets are not allowed in these districts. There are 254 premises provided with this service.

Slop water removal services are undertaken by the Corporation at Clifton, Plumstead, Diep River, Lakeside and Kalk Bay.

House Refuse Removals.

The removal of house refuse is carried out by the Cleansing Branch of the City Engineer's Department as follows:—

In Capetown proper, every weekday, and on Sundays also in certain congested parts.

In Green and Sea Point, every weekday between the Main Road and the sea; and above the Main Road four times a week, but hotels and boarding houses every weekday.

Woodstock and Salt River, from Capetown to Station Road, Observatory, four times a week.

The southern suburbs from Mowbray to Retreat, and the Maitland ward, three times a week.

Muizenberg—Kalk Bay, four times a week, but hotels and boarding houses every weekday.

Clifton and Camps Bay, three times a week. Added areas on the Cape Flats, twice a week.

During the year 1935, the quantity of refuse removed averaged 4,376 cubic yards per week.

The house refuse is disposed of by controlled tipping.

There are no regulations enforcing a uniform approved pattern of covered dustbin, and open paraffin tins and other unsuitable receptacles are extensively used by householders.

SECTION II.—VITAL STATISTICS.

Unless the contrary is stated, all statistics in this section are exclusive of the added districts of Langa and N'dabeni, which contain the native locations and have a selected native population. Births and deaths are allocated to the date of registration and not to the date of occurrence.

The births and deaths statistics are stated variously as:

- (1) "Crude" or "uncorrected"; including all births and deaths registered during the year as having occurred in Capetown.
- (2) "Corrected for outward transfers"; which is the foregoing (1) after the deduction of deaths in Capetown of persons who were not Capetown residents and births in Capetown to mothers who were not Capetown residents.
- (3) "Corrected for outward and inward transfers"; which is the foregoing (2) after the addition of deaths of Capetown residents in parts of the Union outside of Capetown and births in parts of the Union outside of Capetown to mothers who were Capetown residents.

Information as to outward transfers is available from the local returns for both Europeans and non-Europeans; but in regard to inward transfers the information is supplied by the Director of Census and Statistics, Pretoria, and is available in respect of Europeans only.

POPULATION.

The estimate of the European section of the population is based on the census enumerations of 1926 and 1931, but non-Europeans not having been included in the latter census the estimate of the non-European section is calculated from the census returns of 1921 and 1926 and may be less accurate.

The population of the Municipality exclusive of the areas of Langa and N'dabeni, estimated for the 31st December, 1934 (the middle of the year under review), is as follows:—

Race.	Males.	Females.	Persons.
European All Races	72,202	75,498	147,700
	70,291	71,269	141,560
	142,493	146,767	289,260

The rates for the year 1934-35 in this report are based on the above figures, and the births and deaths at the native locations of Langa and N'dabeni are excluded.

The estimated population of the whole Municipality, including Langa and N'dabeni, for the 31st December, 1934, is as follows:—

European. 147,733

Non-European. 145,516

All Races. 293,249

The estimated populations in the various wards of the City for the 31st December, 1934, exclusive of the harbour and shipping, and of Langa and N'dabeni, are as follows:—

	Wards.			European.	Nov Everence	All Dance
No.	Name			European,	Non-European.	All Races.
1	Sea Point			20,078	3,317	23,395
2	Harbour		• • }	4,133	5,638	9,771
3	West Central			1,191	7,290	8,481
4	Kloof			9,670	8,644	18,314
5	Park			11,810	1,857	13,667
6	East Central			7,369	21,622	28,991
7	Castle			879	17,270	18,149
8	Woodstock			10,978	7,997	18,975
9	Salt River			15,027	8,300	23,327
10	Mowbray			14,327	3,292	17,619
11	*Maitland			8,726	10,911	19,637
12	†Rondebosch			11,088	8,968	20,056
13	Claremont			12,288	23,075	35,363
14	Kalk Bay			6,674	4,524	11,198
15	Wynberg	• •	• •	14,720	14,714	29,434
	City	• •		148,958	147,419	296,377

* Exclusive of N'dabeni. † Exclusive of Langa.

Note:—This total, obtained by summating the calculated population for each ward, exceeds the total obtained by direct calculation.

The average population of the added areas of Langa and N'dabeni (including the native locations) for the year 1934-35, based on an enumeration made at the end of each month, was as follows:—

Area.	European.	Coloured.	Native.	Total.	
Langa	16		3,146	3,162	
N'dabeni	17		810	827	
Total	33		3,956	3,989	

The non-European part of the population of the Municipality is made up chiefly of Cape Coloured, and a smaller number of Indians and Natives.

The proportion of the various races is shown in the following table made up from the last census returns:—

		1926 census (including Wynberg Municipality).	1931 census.
Europeans	 	124,407	137,234
Natives	 	6,528	ŕ
Asiatics (chiefly Indians)	 	2,769	
Mixed and other Coloured	 	99,630	
Total	 	233,334	

These figures do not include the population of the N'dabeni Location, which at the 1926 census numbered 5,294 natives, 24 "mixed" and 15 Europeans. The Langa Location was not occupied at the time.

AREA.

The area of the extended Municipality, on 30th June, 1935, amounted to 48,648 acres (76.0 square miles) and the length of the main road passing through the Municipality from the boundary at Bakoven to that at Kalk Bay is about 25 miles.

CITY OF CAPETOWN.

ANNUAL REPORT OF MEDICAL OFFICER OF HEALTH.

PRELIMINARY (PROVISIONAL) RUTURN FOR THE YEAR ENTED 30TH JUNE, 1936.

VITAL STATISTICS.

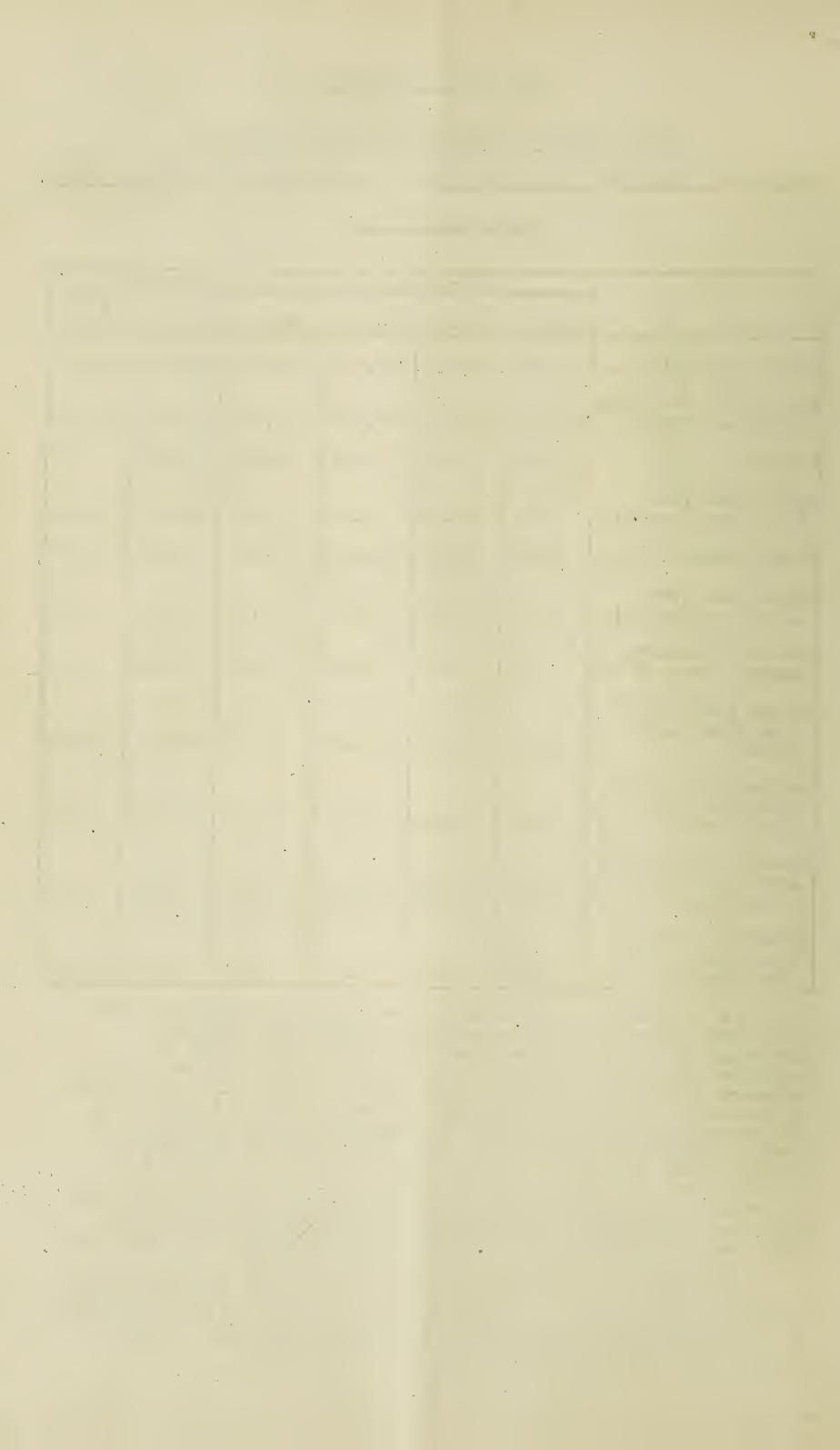
		1935-193	36 :		1934-193	5
	Eur.	Non-E.	All' Racos	Eur	Non-E.	All Races
Total population	150,654	149,976	300,630	147,733	145,516	293,240
Population excluding Native Locations	150,630	145,910	296,540	147,700	141,560	289,260
Births	2,769	6,782	9,551	2,442	6,328	8,770
Birth Rate (per 1,000 population).	18.09	45.73	31.69	16.58	44.82	30.40
Total Deaths	1,635	3,352	4,987	1,597	3,350	4,947
Death Rate (per 1,000 population).	10.68	22.60	16.55	10.84	23.73	17.15
Deaths of infants under 1 year of age	125	988	1,113	124	925	1,049
Infant Mortality Rate (per 1,000 Births	45.14	145.68	116.53	50.78	146.18	119.61
Tuberculosis Death Rate (per 1,000 population)	0.79	4.24	2.49	0.84	4.46	2.61
Enteric Fever Death Rate (per 1,000 population)	0.02	0.04	0.03	0.04	0.06	0.05
Maternal Mortality Rate (per 1,000 live births)	3,97	4.42	4.29	3.69	4.74	4.45

The populations (excluding native locations) shown in this table are estimated from the censuses of 1931 and earlier. According to the preliminary returns of the 1936 census the estimated European population for 1935-36, which is based on the censuses of 1926 and 1931, is very nearly correct (150,630 instead of 150,610), but the non-European population, which is based on the censuses of 1921 and 1926, is overestimated by 5.36 per cent (145,910 instead of 138,480). The population for all races is overestimated by 2.57 per cent (296,540 instead of 289,090).

The European rates shown in the table are therefore correct according to the preliminary sensus figures for 1936, but the non-European rates (except the infant and maternal mortality rates, which are not based on population) are underestimated by 5.36 per

cent, and the rates for all races by 2,57 per cent.

The figures for births, leaths and infectious disease and the corresponding rates, do not include events in the native locations of N'dabeni and Langa. The rates are calculated on the population of the Municipality exclusive of the native locations. The figures are corrected for outward transfers only.



(VITAL STATISTICS CONTINUED).

Total Deaths.

	Berggerille n "nin-g p (C) bejoneis.	19	35-193	6	1	19	34-1935	
			,	All			, I	11
	I	ur	Non-E	Racos	-	Eur I	Non-E F	Racos
		172		9	,	6.	9	15
Enteric fever		3	6	9		6 :	<i>∃</i> .	
Typhus fever			<u> </u>			name of	-	*****
Smallpox		3		3		6	80	86
Scarlet fover		3	1	4		1.	-	1 :
Whooping cough		10	178	188		5	19:	24
Diphtheria		10	17	-27		9	19	28
Influenza,		36	32	68		30	27	57
Plaguc		<u> </u>	4	-			 172	<u></u>
Poliomyclitis		-		~~~		2	3	4 · 3
Encephalitis lethargica		2	1.0	6 11		3	15	18
Cerebrospinal fever			ل.ل.	_ ll.		J		
Tuborculosis, rospiratory system	-	LOI	54 3	644		112	529	651
Tuborculosis meningitis		12	52	64		10		5 9
Other tuberculous diseases		8	34	42		4	41	45
Leprosy			0146			ana ;	1	1
Syphilis		11	101	112		12	103	115
General paralysis of the in-						ì	67	61
sane, tabes dorsalis		7.	24	31		2	21	(1) (1)
Malaria		2	440	2		2	- t	6
Other infectious and parasitic		33	35	68		17	3 3 :	50
diseases Cancer, malignant disease		210		1		186		
Piabetes		56		1		47	'	
Othor general diseases		39				27	1	83
Cerebral haemorrhage, embolism								
and thrombosis		13	12	25		26	12	38
(ther diseases of the nervous			w 0	7.00		F7 A	CO	0.4
systom Heart disease		32	70	1		34	1	
		2 7 5		1		298 -7	•	14
Ancurysm		189	1	1		163		
Arterio-sclerosis Other circulatory diseases		7		1		6	4	
Bronchitis		19		1		29)	
Pneumonia (all forms)	1	92		T		114	482	596
Miners Phthisis (Silicosis)								_
(without tuberculosis)		1	1	2		1	400	1
Minors phthisis (Silicosis)		_	,			•		
with tuberculosis		1	52	67		70	76	95
Other respiratory diseases		15 8	11	T .		1.5		21
Peptic ulcer Diarrhoea etc. (under 2 years)		25	328	1		27	1	
Appendicitis		4	E .		2 3	11	8	
Cirrhosis of liver		11	l .	15			' 3	15
Other diseases of liver, etc.		10	4			10	5	
Other digestive diseases		44	T .	i		40	54	
Acute and chronic nephritis		81	109	190		96	98	194
Other genito-urinary diseases		F7.79	7.0	50		22	. 24	46
(non-venereal)		31						
Puorporal sopsis		5 6	13			4 5	18	
Other puerperal causes Congenital malformations and		O	1.0	13				•
discases of early infancy		67	218	285		68		265
Senility		25	19	44		26	; 3 1	57
Suicide		16	4	20		12		17
Other violence		56	1	1		74	1	156
Other defined causes		39		1		28 8	I control of the cont	65 21
Causes ill-defined, or unknown		4	14	18	11	Ö	10	ملياري
Total	7			4,987	# 7		3,350	

i. Parameter (1997) *.

Deaths of Infants under one year of age.

	Production to the State of Sta	1935-19	76	Y	1934-19	35
		L JOJ-L J	All		1	Ala
	Eur	Non-E	Races	Mar	Non-E	,
I - Common infectious diseases II - Tuberculous diseases III - Diarrhoca and enteritis tis IV - Bronchitis and pneumonia V - Developmental and wasting diseases VI - Miscollaneous diseases es (remainder)	5 3 19 16 56 26	80 21 259 252 290 186	85 24 278 268 346 212	5 1 23 19 51 26	33 26 242 269 197 158	205 205 205
Measles Whooping cough Diphtheria and croup Erysipelas Tuberculosis, meningeal Tuberculosis, abdominal Tuberculosis, other forms Syphilis Simple meningitis Convulsions Bronchitis Pneumonia (all forms) Diarrhoca and enteritis Congenital malformations Congenital debility Premature birth Injury at birth Other diseases peculiar to early infancy Lack of care Suffocation (overlying) Other causes	-41-2-1112 14985 367 9-14	78 2 5 15 8 6 19 44 8 25 9 128 18 25 18 80	. 123-7169706287045 182220165 24-94	221-1-2-6337419 11-3	21 64 13 13 61 19 110 124 136 127 12 144 78	23 8 5 2 14 13 6 5 19 11 6 2 2 6 5 2 0 15 8 2 1 2 5 1 8 1
Total	125	988	1,113	125	925	1,050

(VITAL STATISTICS CONTINUED).

Infectious Diseases Notified. (Corrected to date for errors of diagnosis).

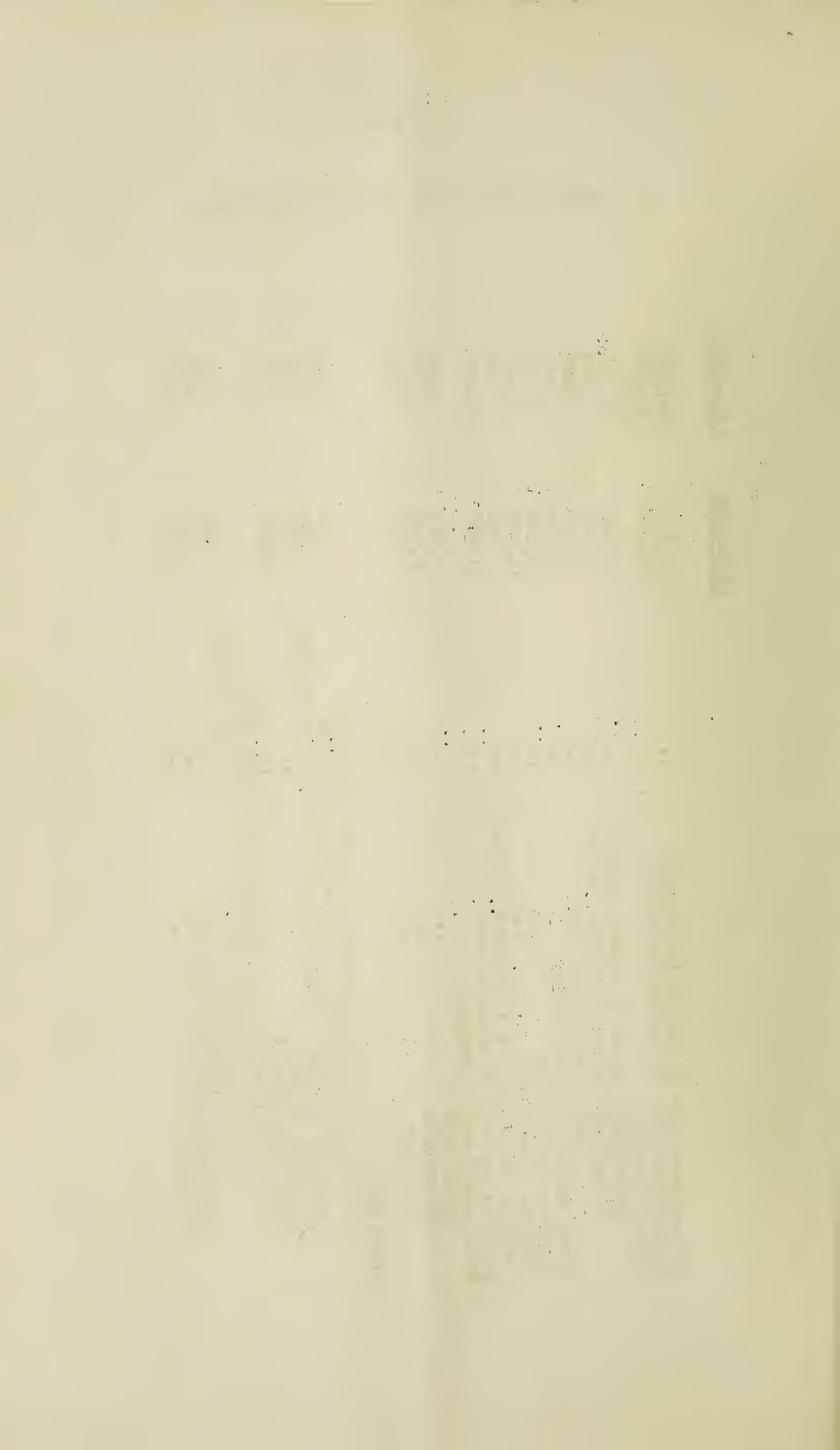
	1	935-193		1	934-193	5
	Eur	Non-E	All Races	Eur	Non-E	All Races
Tuberculosis, pulmonary	177	931	1,108	161	931	1,09%
Other forms of tuberculosis	27	164	191	20	163	183
Scarlet fever	606	34	640	229	14	243
Diphtheria	222	150	372	238	136	374
Enteric fever	41	56	97	33	49	82
Erysipelas	51	4 3	94	44	50	94
Puerperal fever	25	76	101	24	67	91
Ophthalmia neonatorum	36	209	245	30	210	240
Gonorrhoeal ophthalmia	2	24	26	8	49	57
Cerebrospinal fever	9	22	31	5	20	25
Acute poliomyelitis	2	4	6	11	14	25
Infective encephalitis	3	4	7	8	3	11
Influenzal pneumonia	59	67	126	45	82	127
Acute primary pneumonia	143	472	615	138	56 6	701
Trachoma	2	7	9	2	14	16
Leprosy		1	1	1	1	2
Lead poisoning	1	-	1	1	_	1
Typhus fever	ļ		1	-		-
Malta fever	-	_	Janes .	1	-	1
Total	1,407	2,264	3,671	999	2,369	3,368

And the second s 9.1 . . . \$ 100 The second second 1 15. All Marine * 13

. . .

WORK DONE BY CITY HEALTH DEPARTMENT.

1934-1935	158,328 10,100 2,566 5,967 8,533	1,98 2,95 27,95	45,974 3,257 3,597 543	157 143 577 1,999	199 647 2,215
1935-1936	81. 47. 43.	3,1,0,4	41,387 3,754 3,243 610	176 153 464 1,768	214 531 2,213
	Inspections made by Health Inspectors Inspections made by Rodent Inspectors Notices served: Proceedings begun by verbal notice Proceedings begun by written notice Total proceedings begun	Total written notices served Premises disinfested Articles disinfected Articles destroyed for infectious disease	Inspections made by Rat-catchers Rats Gaught and destroyed: Brown rats Black rats Gerbilles	ical Officer of Health of the Slums Act 1934 pursuant to foregoing	repullaing schemes pursuant to foregoing reports and declarations Lettings (dwellings) therein



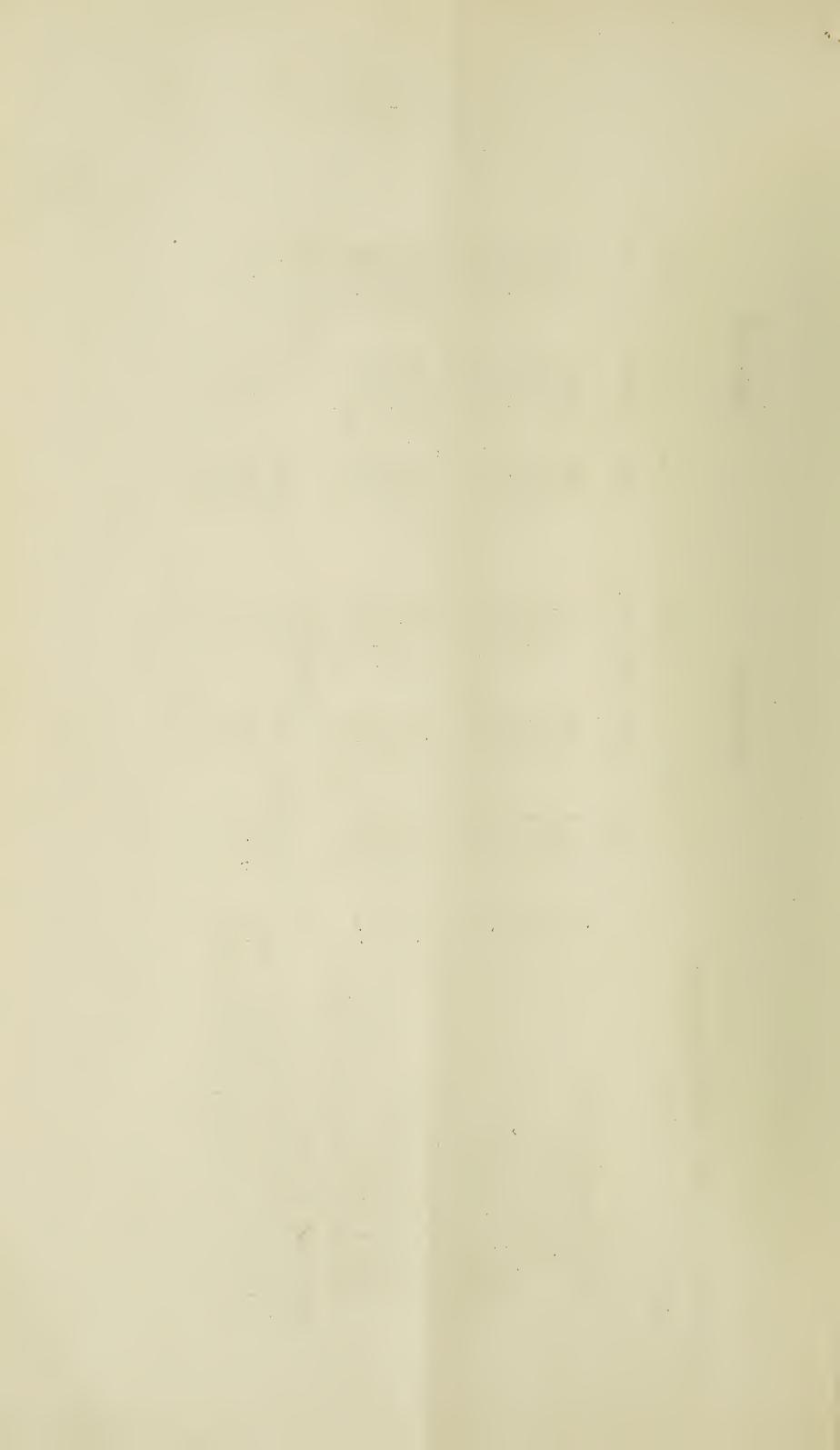
Annications for licences:		
Dealers, general dealers, bakers and butchers ,.	1,561	1,602
Motor garages	45	
Wineral water dealers	53	
Tea rooms, cafes, restaurants and eating houses	467	569
Laundries mattress makers, and barbers or hairdressers	152	121
Purveyors of milk (other than cowkeepers)	231	267
Cowkeepers	94	66
Manufacturers and vondors of ice crem	419	. 400
Hawkers and podlars	1,183	1,340
Places of amusement	146	148
Erection of tents	17	20
	1	
	907,01	797'6
Visits made by Health Visitors (including tuberculosis, social welfare and diphtheria immunization)	73,758	70,289

1934-1935

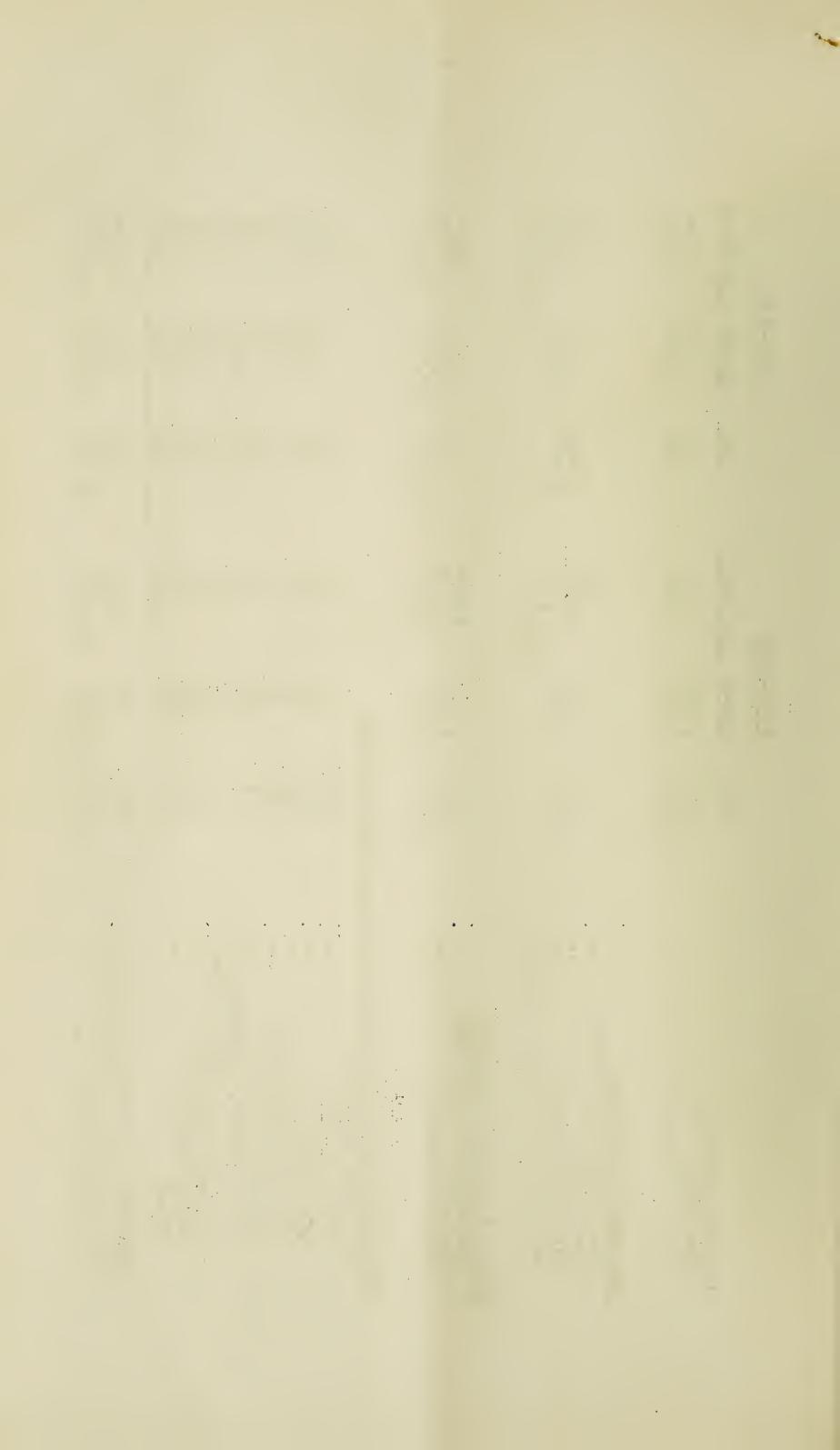
1935-1935

• . .

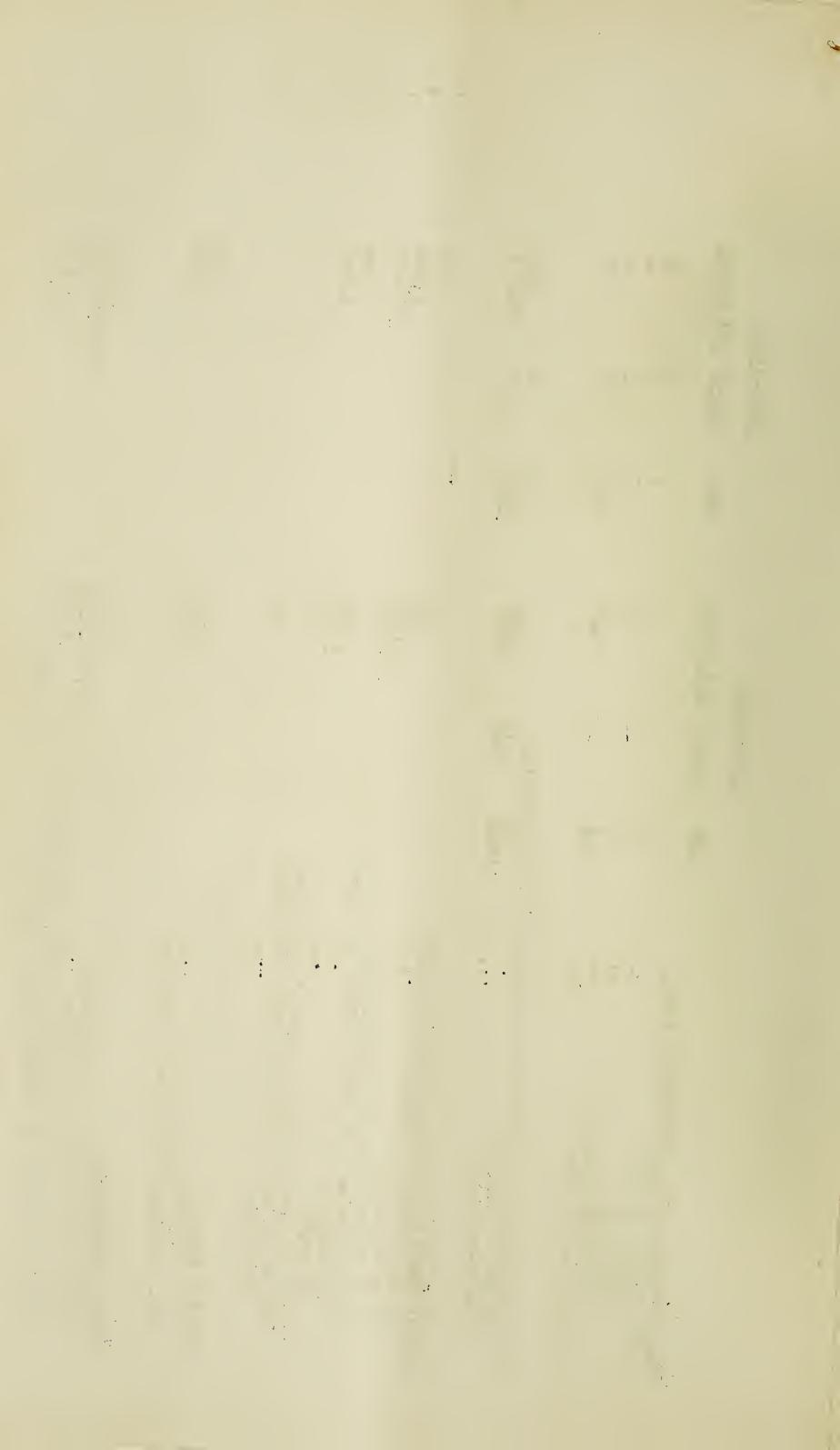
1935-1936		2,481	Non-E All Races Eur Non-E All	5,416 913 4,03	5 2,555 657 2,29 0 7,951 1,550 6,32	2 2,985 467 2,72	, i 0		3,557 25,441 7	10,065 4,018 5,973	2,008 3 115,504 15,575 103,49	42,542 lbs 56,154 351 2,017 1,452 429 1	1,613 2,987 1,835 779	2,000 4,146 5,066 2,134
	Maternity and Child Welfare Centres:	No. of medical sessions	In	onsultations 1,161	1,751	tal clinics 443		Total attendances:	tions 27,345 27,345 cs	5,926	s for mothers and children 11,484	og	rotective inoc- hthoria 1,374	njoctions) 2,146



935	All Races	727 2,132	162 966 6,620 £746.14.1d	1,043 3,746 34,749	155 354 89 16 71 466 1,560 1,560 247 96,184
1934-19	Non-E	516	698 4,769	2,754	137 137 58 11 503 48 136 228 981 981 981
	Eur	211 580	268	992	126 217 31 51 50 100 826 826 721 721 105
926	All Races	1,485	249 1,077 7,518 £610.9.1d	1,057 3,600 34,085	275 425 125 69 69 51 252 246 1,583 1,583 100,302
1935-19	Non-E	1,100	787 5,208	2,698	1 Rd: 176 83 30 42 148 111 958 809 149
	Bur	385 1,095	290	908	260 249 42 15 101 101 9 102 952 Area 158
		• •	ns •• and milk		Discessorms y potown nicipal
		Now cases Total attendances	Tuberculosis Clinies: No. of medical sessions New cases Total attendances Expenditure on bread an	Venercal Discesses Clinies: No. of medical sessions New cases Total attendances	City Hospital for Infectious New cases admitted: Searlet fever Diphtheria Entoric fever Cerebrospinal fever Puerperal fever Tuberculosis, pulmonery " other diseases Other diseases Total New cases from City of Cap New cases from outside Mun Patient-day units



935	All Races	4 1 1808	142	259 3,048 15,818 777 1,882	2,377	56,004 £1,016.11.8d 2,520 £56.7.2d
1934-1935	Non-E	73	6,837			C+3
	Hur	23.	75 9,534			
926	All Races	50 12000	15767	1,557 13,766 1,645 1,645	2,800	61,854 .,071.4.1d 7,925 £105.1.4d
1935-1936	Non-E	1 1 1	dosis: 71 6856	•		21,
	Eur	55 B	for Tuberculosi 8911	n homes: n homes		.s, Hout Street
	tzki o's Farm:	* • • • • • • •	oort Senatorium	nd N'dabeni -patients in their ow Tomen's or	lical Assistant	Washhouses hhouses Washing Bath
	Isolation Hospital, Rentzkie's		Capetown cases at Nelspoort Now cases admitted Petient-day units	Native Hespitels at Lenga end N'dabe New in-patients admitted New out-patients Total attendances of out-patients Attendances on patients in their By doctors By nurse Confinements attended in women's Visits by midrife in connection w finements	Modical Relief: Now cases attended No. of visits by Medical	Public Washhouses: Total attendances at Fees collected at Was Total attendances at Fees collected at Was
	1-1		CO	N	M	Al.



In October, 1933, the following water catchment areas were added to the municipal area (included in the above figures).

 Ward	4	523	acres.
	6	996	,,
	12	118	,,
 ,,	8	256	,,
, ,	10	42	,,
,,	12	379	,,
 ,,	15	1,981	,,
		4,295	
• • •	,,	,, 12 ,, 8 .,, 10 ,, 12	,, 6 996 ,, 12 118 ,, 8 256 ,, 10 42 ,, 12 379 ,, 15 1,981

BIRTHS.

In the following table are shown the births and birth rates for the Municipality of Capetown for the year 1934-35:—

	Bir	rths.	Natura	l Increase.
	Number.	Rate per 1,000 population.	Number.	Rate per 1,000 population.
Europeans (uncorrected)	2,707	18.38	893	6.06
,, (corrected for outward transfers)	2,442	16.58	845	5.74
and inward transfers)	2,469	16.76	830	5.63
Non-Europeans (uncorrected) (corrected for out-	6,457	45.74	2,874	20.36
ward transfers)	6,328	44.82	2,978	$21 \cdot 09$
All Races (uncorrected)	9,164	31.77	3,767	$13 \cdot 06$
,, ,, (corrected for outward transfers)	8,770	30.40	3,823	13.25

It will be seen that the non-European birth rate (corrected for outward transfers) was 2.7 times as great as the European.

In Table C, on page 129, the annual birth rate and rate of natural increase

for 22 years are set out in years and quinquennia.

Both for Europeans and non-Europeans the birth rate for the year under review was the lowest yet recorded. The European rate was 6.5 per cent. less than in the previous year and the non-European rate 7.6 per cent. less than in the

previous year.

The natural increase in the population (i.e. the excess of births over deaths) was still more diminished as compared with the previous year on account of an increase in the death rates for both races. The decrease was 33 per cent. for Europeans and 21 per cent. for non-Europeans. The natural increase of non-Europeans (2,978) was 3.5 times as great as that of Europeans (845). Five years ago the natural increase of non-Europeans was only double that of Europeans.

In Table D, on page 130, the births, illegitimate births and natural increase.

together with the corresponding rates, will be found classified for wards.

In the following table the births for the year are tabulated according to race, sex and legitimacy.

Race.	Legit	imate.	Illegit	imate.		Total.	
*	Male.	Female.	Male.	Female.	Male.	Female.	Persons.
A. European	1,171 2,481 3,652	1,155 2,461 3,616	50 712 762	66 674 740	1,221 3,193 4,414 1,236	1,221 3,135 4,356 1,233	2,442 6,328 8,770 2,469

A. Corrected for outward transfers.

B. Corrected for outward and inward transfers.

In Table B, on page 128, the births will be found tabulated on the same basis for wards, and also the still-births by race and legitimacy.

The number of still-births registered as having taken place in Capetown during the year was 417, of which 78 were European and 339 non-European. Corrected for outward transfers the number was 396 (71 European and 325 non-European).

The number of male births per 100 female births (corrected for outward transfers) was 100·0 amongst Europeans and 101·9 amongst non-Europeans.

The percentage of illegitimate to total births (corrected for outward transfers) was 4.8 amongst Europeans and 21.9 amongst non-Europeans. The corresponding figures for former years will be found in Table C, on page 129.

2,038 births (1,111 European and 927 non-European) and 106 still-births (34 European and 72 non-European) took place in maternity homes and other institutions within the Municipality. Corrected for outward transfers the births in institutions were 1,697 live births (883 European and 814 non-European), and 86 still-births (27 European and 59 non-European). This is equivalent to a percentage of 19.4 of all live births (corrected for outward transfers), the percentage being 36.2 amongst Europeans and 12.9 amongst non-Europeans. The corresponding figures for the previous year were 17.8, 32.9 and 12.0.

Births in the Langa and N'dabeni Locations are not included in the foregoing figures. Particulars regarding these will be found in Table J, on page 136.

For the purpose of comparison statistical particulars as to births in the Union of South Africa, in other towns, and in England and Wales, are set out in Table E, on page 131. The European birth rate in Capetown was less than that of any other large town in the Union, and 28 per cent. less than that of the Union as a whole.

DEATHS.

In the following table are shown the deaths and death rates for the Municipality of Capetown for the year 1934-35.

	No. of deaths.	Death rate per 1,000 population.
Europeans (uncorrected)	1,814	$12 \cdot 32$
,, (corrected for outward transfers)	1,597	10.84
,, (corrected for outward and inward	,	
transfers)	1,639	11.13
Non-Europeans (uncorrected)	3,583	$25 \cdot 38$
,, (corrected for outward transfers)	3,350	$23 \cdot 73$
All Races (uncorrected)	5,397	18.71
,, ,, (corrected for outward transfers)	4,947	17.15
		3

It will be seen that the non-European death rate (corrected for outward transfers) was 2.2 times as great as the European.

In Table C, on page 129, the annual death rate for twenty-two years is set out in years and quinquennia.

The European death rate for the year under review was greater than that of the previous year by 18 per cent. and the non-European by 8 per cent. Compared with the preceding quinquennium the European and non-European rates were greater by 7 per cent. and 1.6 per cent.

To explore the causes of this high mortality reference may be made to the table on page 23, where the deaths from various causes are set out for 1933-34 and 1934-35.

CITY OF CAPETOWN: TOTAL DEATHS.

(Corrected for outward transfers in the case of non-Europeans and all races, and for outward and inward transfers in the case of Europeans).

		1934-193	5.		1933-1934	
	European.	Non- European.	All Races.	European.	Non- European.	All Races.
Enteric fever	6	9	15	2	7	9
Typhus fever	_		_	_	_	10400
Smallpox	6	80	86	3	23	$\frac{-}{26}$
Measles Scarlet fever	1		1			
Whooping cough	5	19	24	1	19	$^{-20}$
Diphtheria	9	19	28	6	11	17
Influenza	30	27	57	8	9	37
Plague Poliomyelitis		3	4			_
Encephalitis lethargica	2	1	3	_		_
Cerebrospinal fever	3	15	18	3	17	20
Tuberculosis, respiratory system	112	529	651	121	597	718
Tuberculous meningitis	10	$\begin{array}{c} 49 \\ 41 \end{array}$	$\begin{array}{c} 59 \\ 45 \end{array}$	$\frac{9}{3}$	43 50	$\begin{array}{c} 52 \\ 53 \end{array}$
Other tuberculous diseases Leprosy	4	1	1			—
Syphilis	12	103	115	9	96	105
General paralysis of the insane.			3.00			
tabes dorsalis	4 2	21	$\frac{25}{2}$	$\frac{7}{1}$	22	29
Malaria Other infectious and parasitie	2	_	2	1		Ī
diseases	17	33	50	13	24	37
Cancer, malignant disease	186	97	283	189	105	294
Diabetes	47	18	65	31	9	40
Other general diseases	27	56	83	18	45	63
*Cerebral haemorrhage, embolism and thrombosis	26	12	38	73	73	146
Other diseases of the nervous						
system	34	60	94	29	75	104
Heart disease	298	229	527 14	220	205	$\begin{array}{c} 425 \\ 11 \end{array}$
Aneurysm	163	123	286	87	$\begin{array}{c c} & 5 \\ 52 \end{array}$	139
*Arterio-sclerosis Other circulatory diseases	6	5	11	7	5	12
Bronchitis	29	278	307	30	170	200
Pneumonia (all forms)	114	482	596	61	346	407
Miners' phthisis (Silicosis) without	1		1	2	1	2
tuberculosis Miners' phthisis (Silicosis) with	l		1	4		<u>ن</u>
tuberculosis						_
Other respiratory diseases	19	76	95	27	30	57
Peptic ulcer	15	$\begin{array}{c c} & 6 \\ 354 \end{array}$	$\frac{21}{381}$	17 34	$\begin{array}{c} 7 \\ 428 \end{array}$	24 462
Diarrhoea, etc. (under 2 years)	27	354	19	6	428	462 13
Appendicitis Cirrhosis of liver	12	3	15	17	4	21
Other diseases of liver, etc	10	5	15	6	4	10
Other digestive diseases	40	54	94	25	55	80
Acute and chronic nephritis	96	98	194	72	76	148
Other genito-urinary diseases (non- venereal)	22	24	46	26	20	46
Puerperal sepsis	4	12	16	3	10	13
Other puerperal causes	5	18	23	7	18	25
Congenital malformations and	68	197	265	46	211	257
diseases of early infancy	26	31	57	45	35	80
Senility	12	5	17	15	2	17
Other violence	74	82	156	49	72	121
Other defined causes	28	37 13	$\begin{array}{c c} 65 \\ 21 \end{array}$	24 5	18	42 13†
Causes ill-defined, or unknown	8	19	21	9	0	19
Total	1,639	3,350	4,989	, 1,363	3,011	4,376†

[†] Including the deaths of 2 newly born children of unknown race.

* There has been some variation in the allocation of deaths as between these two causes.

CERTAIN LEADING CAUSES OF DEATH FOR THE YEAR UNDER REVIEW AND FOR PREVIOUS YEARS CORRECTED FOR OUTWARD TRANSFERS (Excluding Wynberg).

Enteric Fever Eur. Smallpox Eur. Chicken Pox Non-E. Weasles Eur.	e. 1924.		-	-								-			
	1925.		1925. 1926.	192 6. 1927.	1927. 1928.	1928. 1929.	1929. 1930.	1930. 1931.	1931. — 1932.	1932. — 1933.	1933. 1934.	Average for 10 years	1934. 1935.	Average for 10 years.	1934. — 1935.
	ei	s 20	81	15	0 62	13	8	218	10	භ 4	92	8.4	ന ∞	0.07	0.00
	E					1 1	-	1 1		1 1	1 1	1 1	1 1	7 10 10 10 10 10 10 10 10 10 10 10 10 10	
			-	1 1								0.5		00-0	
Non-E	F	-01	9	38	11	6.9	12		3 S	1 1	22	3 :3 14 ·9	9	0.03	0.05
Scarlet Fever Eur. Non-E.	E				(O)			-	ıı			0.5		00.0	0.01
Whooping-Cough Eur.	<u> </u>	10	20 20	19	19	11 22	15	20	8	25		7.5	19	0.0 6 0.27	0.04
Diphtheria and Croup Eur. Non-E	户	17	8	12	10	12	11	8 10	11	∞ 10	10	9.9	88	0 .10	0.06
Influenza Eur. Non-E	E E	30	13	13	17	18	30	7 25	25 40	9	80	16.5	25	0.14	0.19
Erysipelas Eur. Non-E	田.	1 61	1	1 1	ಟ ಸರ	410	4100	61 61	සය	es	- 1	1.9	4.01	0.02	0.03
Acute Anterior Eur. Poliomyelitis. Non-E	·B.				cı m		3	- 2	1	10	+ 1	6.0	- es	0.01	$0.01 \\ 0.02$
Encephalitis Eur. Lethargica.	· 图·	w 4	9 12	410	m 01	೯೧ ೯೧	က	ر د	<u>τ</u> ο	- 1	1 1	2.7	21-	0.02	0.02
Meningococcal Meningitis. Non-E	· 연	5	5 19	9	13 79	14	25	3	3	4 14	3 16	6.3	13	0.05	0.02
Syphilis Eur.		3 61	61	67	77	10	7	111	8	81	8 84	7 .2	68	0.06	0.07

Certain Leading Causes of Death for the Year under review and for previous Years corrected for Ultward Transfers (Excluding Wynberg)—continued.

1930. 1931. 1932. 1933. Average lost. 1934. 1931. 1932. 1933. 1934. 10 years. 1935. 1931. 1932. 1933. 1934. 10 years. 1935. 1931. 1932. 1933. 1934. 10 years. 1935. 1448 516 512 532 429.7 471 14 19 19 10 14.5 471 14 19 19 10 14.5 471 15 15 19 16 471 471 15 16 18 17.8 9 471 17 94 83 65.6 65.6 76 18 17 79 16.4 27 8 18 18 16 46 32.4 110 18 18 18 16 16 16 16 16 16 16 16 16					,		, N	N Transport	ов Вилине	SH					Death I	Death Rates per
Primares Paris P									1						od ooo'i	paramon
Properculosis	Diseases.	Race.	1924. 1925.	1925. ————————————————————————————————————	1926. — 1927.	1927. 1928.	1928. 1929.	1929. — 1930.	1930.	1931.	1932. 1933.	1933.	Average for 10 years.	1934. — 1935.	Average for 10 years.	
Twberenbasis—Other Forms Ear. 13 14 17 13 14 16 17 18 19 19 19 16 14 0-12 0 Ameren Other Forms Non-E. 50 54 50 76 19 17 16 16 16 10 <th< td=""><td>Tuberculosis—Pulmonary</td><td>Eur. Nen-E.</td><td>372</td><td>313</td><td>399</td><td>383</td><td>65 389</td><td>69</td><td>74 448</td><td>77 516</td><td>98</td><td>104</td><td></td><td>100</td><td></td><td></td></th<>	Tuberculosis—Pulmonary	Eur. Nen-E.	372	313	399	383	65 389	69	74 448	77 516	98	104		100		
Checker, Malignant Eur. 75 112 114 119 120 125 154 157 164 185 163 185	ner	Eur. Non-E.	13	13	14 50	17 70	13	113	14	19 20	19	10 82		14 76	0.12	
Rheumatic Fever Bur. 7 1 1 7 6 8 12 7 8 7 8 7 8 7 9 0-05 Cerebral Heumornhage, Bur. 36 40 35 37 49 31 47 77 114 67 53 22 0-44 Arterio-Sclerosis Bur. 55 62 24 49 31 47 77 114 67 53 22 0-41 Arterio-Sclerosis Bur. 55 62 24 66 67 32 37 47 144 67 32 37 47 144 67 73 36 18 16 67 73 36 18 <		Eur. Non-E.	107	112	114	119	130	135	162	150	157	169	35	165		1.25 0.69
Cerebral Hemorrhage, Bur. Bur. 36 41 36 37 49 31 43 47 41 67 53-3 29 64-4 Embolism & Apoplexy Non-E. 36 41 38 33 20 29 37 47 47 64 43·9 9 64-4 43·9 64-4	Fever .	Eur. Non-E.	27	13 22	18	= 19	17	6	8 112	12 31	17		6	9 27		
Arterio-Selerosis		Eur. Non-E.	38	40	3 co	33.71	49	31 29	43	79	114	67		22	0.44	0.17
Eur. 191 180 146 208 218 214 227 179 192 197 195 - 2 259 1 - 63 1 Ron-E. 193 205 202 203 201 209 211 183 162 191 196 - 0 203 1 - 83 1 Ron-E. 488 494 760 743 549 515 504 490 485 558 - 8 737 523 5 Rur. 102 84 68 64 53 61 490 485 558 - 8 737 528 5 6 Rur. 32 43 61 66 68 62 59 67 71 37 75 67 71 73 358	Arterio-Sclerosis .	Eur. Non-E.	55	62	54	66	67	333	53	36 36	47	79		150	0.51	1.13
Eur. 89 97 128 129 119 90 83 129 81 80 102.5 130 0.85 5 5 23 5	•	Eur. Non-E.	191	180	146	208	218	214	227 211	179	192	197		259 203		
Eur. 102 84 68 54 63 36	Bronchitis, Pneumonia and Pleurisy	Eur. Non-E.	89	97	128	129	119	90	83	129 564	\$1 490	80		130	0 .85	
Eur. 32 43 61 66 68 62 59 58 48 55 55 · 2 67 71 · 3 75 0·46 Non-E. 71 57 78 66 79 67 71 · 3 75 0·67 Eur. 6 13 7 9 6 8 8 8 6 5 7·6 9 0·07 Rur. 52 40 46 44 46 61 54 57 36 33 46·9 44 0·39 Non-E. 159 170 140 170 187 189 76 69 56 64+4 75 0·54 Fur. 59 47 78 66 49 66 69 64 69 70·1 83 0·66	Diarrhea and Enteritis	Eur. Non-E.	102	84	68	54	53	59	61	59 410	39	39		38 328		
Eur. - - 4 4 5 2 4 1 2 2 2 4 4 6 8 8 8 8 8 6 5 7·6 9 0.02 Non-E. 52 40 46 44 46 61 54 57 36 33 46·9 44 0·39 Non-E. 159 170 140 170 187 189 176 180 168·6 168·6 168·6 168·6 1·58 Eur. 59 47 78 66 49 65 79 76 69 56 64·4 75 0·54 Non-E. 58 54 69 70·1 83 0·66	Nephritis and Bright's Disease	Eur. Non-E.	32	43	61 78	69	68	62	59	58	48 54	55		67		$\begin{array}{c} 0.51 \\ 0.59 \end{array}$
Eur.5240464446615457363346·9440·39Non-E.15947786649657976695664·4750·54Non-E.585474745987878663646970·1830·66	Fever .	Eur. Non-E.	9	13	41	4 6	200	61 00	4 00	- ∞	619	6170	Ę [4	0.02	0.03
mature Birth Non-E. 159 170 140 170 187 189 176 186 168 6 156 158 1 58 Causes Eur. 59 47 78 66 49 65 79 76 69 56 64 4 75 0 54 Non-E. 58 54 74 75 59 87 87 86 63 64 69 70 1 83 0 66	Congenital Debility and Malformations. inclu-	Eur.	55	40	46	444	46	61	54	57	36	83		44	0 -39	
Causes Eur. 59 47 78 66 49 65 79 76 69 56 64.4 75 0.54 Non-E. 58 54 74 59 87 87 86 63 64 69 70.1 83 0.66	ding Premature Birth	Non-E.	159	159	170	140	170	187		176	180	156	168 ·6	156	1.58	
	Causes .	Eur. Non-E.	59	47	78 74	66	49	65	79	76	69	56		75	0.54	0.57

The following were the chief causes of death which caused greater mortality amongst Europeans in 1934-35 than in 1933-34, the additional number of deaths being shown in each case: diseases of the heart and circulation 100*, bronchitis and pneumonia 50, influenza 21, certain other infective conditions 26, nephritis 25, congenital malformations and debility, etc., 23, violence 23.

The corresponding data for non-Europeans were as follows: bronchitis and pneumonia 244, measles 57, influenza 18, certain other infective conditions 31,

diseases of the heart and circulation 36*, nephritis 22, violence 13.

It would appear that a good deal of the higher mortality in 1934-35 was caused by influenza, measles and other catarrhal conditions.

Reference may also be made to the table on page 24, which shows the mor-

tality from certain leading causes of death for a series of years.

In Table Λ , pages 109 to 127, the deaths for the year will be found fully classified for causes, race, sex, age and ward.

In Table D, on page 130, will be found the death rates for the year for the

several wards of the Municipality.

In Table E, on page 131, the death rates for the Union of South Africa, in certain other towns, and in England and Wales, are set out for purposes of comparison.

Deaths in the Langa and N'dabeni native locations are not included in the foregoing figures. Particulars regarding these will be found in Table J, on

page 136.

DEATHS IN INSTITUTIONS.

The following table shows the number of deaths which took place in institutions in Capetown, and also of the Capetown European deaths which occurred in institutions in other parts of the Union of South Africa:—

Institution.		Sex.	Total I	Deaths.	Dea belong Capet	ing to	below to Car (Out	ns not nging petown. ward sfers).
			Euro- pean.	Non- Euro- pean.	Euro- pean.	Non- Euro- pean.	Euro- pean.	Non- Euro- pean.
Somerset Hospital		Male Female	137 56	150 56	101 43	118 45	36 13	32 11
City Hospital		Malc Female	51 37	130 123	43 31	103 104	8 6	27 19
Wynberg (Victoria) Hospital	• • • • •	Male Female	35 23	59 39	29 17	41 27	6	18 12
Valkenberg Mental Hospital	• • • •	Male Female	$\begin{array}{c} 24 \\ 20 \end{array}$	61 24	14 13	34	10 7	27 15
Woodstock Hospital		Male Female	43 20	32 32	39 18	23 28	$\frac{4}{2}$	9
Capetown Infirmary	• • • • • • • • • • • • • • • • • • • •	Male Female	43 13	34 17	29 7	$\frac{23}{12}$	1 <u>4</u>	11 5
Peninsula Maternity Hospita		Male Female	$\frac{6}{9}$	12 18	4 6	9	2 3	3 3
Mowbray and Rondebosch	Hospital	Male Female	16 10	9 7	15 5	7 5	1 5	$\frac{2}{2}$
Monestery Nursing Home	• • • • •	Male Female	16 25		14 20		$\frac{2}{5}$	
Volkshospitaal	• • • • •	Male Female	18 12	<u> </u>	$\frac{8}{3}$	1	10 9	_
Diakones Hospital	• • • •	Male Female	15 12		$\begin{array}{c} 11 \\ 12 \end{array}$		4	
Hof Street Nursing Home	• • • •	Male Female			10		5 3	
3	• • • • •	Male Female	16 7	- :	10 7		6	
Tamboers Kloof Nursing Ho		Male Female	13	1	7 2		6	
Booth Memorial Home Nazareth House	• • • •	Male Female	$\frac{2}{11}$	-	10		1	_
Nazareth House Cape Jewish Aged Home	• • • • •	Male Female Male Female	6 5 7 4	Pater sense generating	6 5 7			

^{*} There having been some variation in the allocation of deaths from "cerebral haemorrhage, etc." to that heading or to "diseases of the arteries", deaths included under "cerebral haemorrhage, etc." are here included under "diseases of the heart and circulation."

Institution.		1	Sex.	Total I	Deaths.	Dea belong Capet	ing to	Death belon to Cap (Out	ging etown. ward
				Euro- pean.	Non- Euro- pean.	Euro- pean.	Non- Euro- pean.	Euro- pean.	Non- Euro- pean.
St. Monica's Nursing Home			Male		6 5		4		$\frac{2}{1}$
Capetown Gaol		• •	Female Male	1	8	1	3	_	$ \begin{array}{c} $
King's House Nursing Home			Female Male	$-\frac{}{2}$	2	1	1	1	
Central Nursing Home			Female Male	8 5		8 5	-	_	_
Wynberg Military Hospital			Female Male	4.4	2	$\frac{4}{2}$	_	$\frac{}{2}$	$\frac{}{2}$
Gardens Nursing Home			Female Male	_		_		_	_
Lady Buxton Home			Female Male	6 4		5 4	_	1	
Alexandra Institution			Female Male	2 2		$\frac{1}{2}$	_	2	_
	• •	• •	Female Male	4 3		$\frac{2}{4}$		$\frac{}{2}$	_
Wheatfield Nursing Home	• •		Female	2		1		ī	—
Dunmore Nursing Home	• •	• •	Male Female	5		5		_	_
" Vrede Oord "	• •	• •	Male Female	_	$\frac{2}{3}$		2		2
Axminster Nursing Home	• •	• •	Male Female	$\frac{}{4}$	_	4			
Claremont Nursing Home		• •	Male Female	$\frac{1}{4}$	_	4	_		
Vita Nova Nursing Home			Male Female	$\frac{2}{2}$		£1/2	1	1	_
Salubritas Nursing Home			Male Female	$\frac{5}{1}$	<u> </u>	$\frac{2}{1}$	1		
Longroyd Nursing Home		• •	Male		_		_		_
Trafalgar Nursing Home			Female Male	$\frac{2}{2}$		$\frac{2}{2}$		_	_
Ladies' Christian Home			Female Male	_	newsoniers newsoniers	_	_		_
The Rest, Tuin Plein			Female Male	$\frac{2}{2}$		$\frac{2}{1}$		1	
Struben's Nursing Home			Female Male	1		I			
Nurse Rose's Nursing Home			Female Male				_		
Dorcas Homes	• •		Female Male	1	_	1	_		
Old Manch Homes			Female Male	1 1	·	1 1			_
Old Men's Holne	• •		Female						
Totals			Male Female	494 326	506 326	373 256	368 251	121 70	138 75
Inward Transfers. General Hospitals	• •		Male Female	8 4		8 4			
Nursing Homes	• •		Male Female	2		2		_	
Mental Hospitals			Male Female	2	_	2			
Totals	• •		Male Female	12 4		12 4			

Of the total Capetown deaths (uncorrected) 30.6 per cent. took place in institutions, the percentage of European deaths being 45.2 and of non-European deaths 23.2. Of the deaths in Capetown institutions 404 (191 Europeans and 213 non-Europeans) did not belong to Capetown, and when corrected for outward transfers the percentages are 25.2, 39.4 and 18.5 respectively. In the previous year the corresponding figures were 24.6, 33.9 and 20.5. After including the deaths of Capetown European residents who died outside the Municipality the percentage of deaths of Capetown Europeans which took place in institutions (corrected for outward and inward transfers) becomes 39.4.

Excluded from the above figures regarding deaths in institutions are deaths which occurred in the hospitals in Langa and N'dabeni native locations. The

particulars regarding these will be found in Table J. on page 136.

SEASONAL VARIATION.

In the following table deaths are arranged according to the month of registration and classified as to race and sex.

Month.		No. of]3	European B.	١.	. E	uropean A.	•	No	n-Europe A.	ean.
		Wks.	М.	F.	Total.	М.	F.	Total.	M.	F.	Total.
July		5	97	61	158	92	59	151	190	173	363
1 4		4	68	68	136	68	66	134	157	145	302
1 0 1		4	71	56	127	71	56	127	158	119	277
		5	100	68	168	98	65	163	172	131	303
NT. 1	1	4	56	48	104	54	48	102	141	98	239
December		4	61	57	118	59	55	114	118	131	249
January		5	66	88	154	63	87	150	176	149	325
TN 1	1	4	66	47	113	65	45	110	131	108	239
N.T. I		4	66	44	110	66	41	107	95	92	187
April		5	84	62	146	83	61	144	163	131	294
7.1		4	53	59	112	48	58	106	145	133	278
T	• •	4	119	74	193	116	73	189	146	148	294
Year	• •	52	907	732	1,639	883	714	1,597	1,792	1,558	3,350

A. Corrected for outward transfers.

B. Corrected for outward and inward transfers.

The following table shows the mortality from certain leading causes of death in each month of the year (European deaths corrected for outward and inward transfers; non-European corrected for outward transfers only; deaths belonging to the native locations of Langa and N'dabeni excluded):—

Diseases.	Race.	July (5 Weeks).	August (4 Weeks).	September (4 Weeks).	October (5 Weeks).	November (4 Weeks)	December (4 Weeks).	January (5 Weeks).	February (4 Weeks).	March (4 Weeks).	April (5 Weeks).	May (4 Weeks).	June (4 Weeks).	Year (52 Weeks)
Enteric Fever Smallpox Chicken-pox Measles Scarlet Fever Whooping Cough Diphtheria and Croup Influenza Erysipelas Syphilis Tuberculosis, Respiratory System Tuberculosis, other Forms Cancer, Malignant Disease Rheumatic Fever Cerebral Haemorrhage, Embolism and Apoplexy Arterio-selevosis Heart Disease Bronchitis, Pneumonia and Pleurisy Diarrhæa and Enteritis Nephritis and Bright's Disease Puerperal Fever	Eur. Non-E. Eur.	$\begin{array}{c c} & & & \\ \hline - & & \\ \hline - & \\ \hline 15 \\ \hline - & \\ \hline - & \\ \hline 3 \\ 3 \\ 1 \\ 4 \\ \hline - & \\ \hline - & \\ \hline - & \\ \hline 3 \\ 59 \\ \hline - & \\ \hline - & \\ \hline 15 \\ 10 \\ \hline - & \\ \hline - & \\ \hline 17 \\ 11 \\ 34 \\ 20 \\ \hline 17 \\ 91 \\ 4 \\ 31 \\ 10 \\ \hline 11 \\ \hline - & \\ \hline 2 \\ \end{array}$	1			$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	6 9 - - 6 80 1 - 5 19 9 19 30 27 4 2 12 103 112 539 14 90 186 97 9 28 26 12 163 123 298 229 148 794 43 88 88 98 98 163 163 163 163 163 163 163 163
Congenital Debility and Malformations, including Premature Birth External Causes	Eur. Non-E. Eur. Non-E.	21 5 11	3 12 6 2	17 4 4	5 17 3 6	11 12 3	6 14 6 4	6 10 9 7	3 17 5 9	6 7 11	6 14 10 8	6 10 4 13	6 22 15 9	48 171 86 87

Reference to Tables K to O, on pages 137 to 141 will enable the monthly mortality figures to be compared with meteorological conditions.

SEX.

The deaths during the year under review are classified in the following table according to sex (figures for the native locations of Langa and N'dabeni being excluded); the corresponding rates are also shown:—

	Race.	Uncor	rected.	Correct Outward	ed for Transfers.	Corrected for Outward and Inward Transfers.		
Ť		Males.	Females.	Males.	Females.	Males.	Females.	
Deaths	European Non-European All Races	1,021 1,940 2,961	793 1,643 2,436	883 1,792 2,675	714 1,558 2,272	907	732	
Death Rates per 1,000 population concerned.	European Non-European All Races	14·18 27·68 20·84	$ \begin{array}{ c c c c } \hline 10.53 \\ 23.12 \\ 16.64 \\ \end{array} $	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	9.48 21.92 15.52	12.60	9.72	

It will be seen from the above figures that in Europeans the death-rate (corrected for outward and inward transfers) amongst males was 29.6 per cent. greater than amongst females; and in non-Europeans the death rate (corrected for outward transfers) amongst males was 16.6 per cent. greater than amongst females.

AGE AT DEATH.

The number of deaths at various ages are summarised in the following table:—

	No	o. of Death	ıs.	Percen	tage of all	Deaths.
	Male.	Female.	Total.	Male.	Female.	Total.
A. Europeans: Under 1 year Over 1 and under 5 years ,, 5 ,, 25 ,, ,, 25 ,, 65 ,, ,, 65 years	56 41 60 379 371	69 23 67 273 300	125 64 127 652 671	$ \begin{array}{c} 6 \cdot 17 \\ 4 \cdot 52 \\ 6 \cdot 62 \\ 41 \cdot 79 \\ 40 \cdot 90 \end{array} $	9.43 3.14 9.15 37.30 40.98	7 ·63 3 ·91 7 ·75 39 ·77 40 ·94
Total European deaths	907	732	1,639	100 .00	100 .00	100 .00
B. Non-Europeans: Under 1 year Over 1 and under 5 years ,, 5 ,, 25 ,, ,, 25 ,, 65 ,, ,, 65 years	481 373 181 601 156	444 330 200 436 148	925 703 381 1,037 304	26 ·84 20 ·81 10 ·10 33 ·54 8 ·71	28 ·50 21 ·18 12 ·84 27 ·98 9 ·50	27 ·61 20 ·99 11 ·37 30 ·96 9 ·07
Total Non-European Deaths	1,792	1,558	3,350	100 .00	100 .00	100 .00

A. Corrected for outward and inward transfers.

From the above figures it will be seen that for the year under review the deaths under 5 years of age constitute 11.5 per cent. of all deaths in the case of Europeans, as compared with 48.6 per cent. of all deaths in the case of non-Europeans; and that the deaths under 25 years of age constitute 19.3 per cent. of all deaths in the case of Europeans, as compared with 60.0 per cent. of all deaths in the case of non-Europeans.

B. Corrected for outward transfers.

INFANT MORTALITY.

In the following table are shown the deaths of infants under one year of age and the rates of infant mortality for the Municipality of Capetown for the year 1934-35:—

	No. of deaths under one year of age.	Deaths under one year of age per 1,000 births.
Europeans (uncorrected)	136	50.2
(corrected for outward transfers) (corrected for outward and inward	124	50.8
transfers)	125	$50 \cdot 6$
Non-Europeans (uncorrected)	953	147.6
(corrected for outward transfers)	925	$146 \cdot 2$
All Races (uncorrected)	1,089	118.8
,, ,, (corrected for outward transfers)	1,049	119.6

It will be seen that the non-European infant mortality rate (corrected for outward transfers) was 2.9 times as great as the European.

In Table C, on page 129, the annual infant mortality rate for twenty-two years is set out in years and quinquennia.

The European infant mortality rate for the year under review was greater than that of the previous year by 46 per cent. and the non-European by 9 per cent. Nevertheless both rates were lower than those of any former year except 1933-34 and 1932-33. Compared with the preceding quinquennium the European and non-European rates were less by 9 per cent. and 4 per cent.

The chief causes of the higher European mortality were bronchitis and pneumonia (11 more deaths) and congenital malformations and debility, etc., (19 more deaths). In the case of non-Europeans the chief causes were bronchitis and pneumonia (69 more deaths) and measles (12 more deaths), offset by the fact that there were 49 less deaths from diarrheal diseases.

The causes of infant mortality will be found in Table A on pages 109 to 127, classified for race and sex. The following two tables are added to show more clearly the principal causes of death and age at death. It will be seen that this year the non-European infant deaths from bronchitis and pneumonia were more numerous than those from diarrhea and enteritis.

Infant Mortality from Certain Diseases per 1,000 Births (1934-35).

	Euro	pean.	Non-European:
Disease.	В.	A.	Α.
Zymotic Diseases (Measles, Diphtheria, Scarlet Fever, Enteric Fever and Whooping-Cough) Tuberculosis	$ \begin{array}{c} 2 \cdot 0 \\ 0 \cdot 4 \\ 19 \cdot 8 \\ 1 \cdot 6 \\ \hline 7 \cdot 8 \\ 9 \cdot 3 \end{array} $	$ \begin{array}{c} 2 \cdot 0 \\ 0 \cdot 4 \\ 19 \cdot 8 \\ 1 \cdot 6 \\ \hline 7 \cdot 8 \\ 9 \cdot 0 \end{array} $	$4 \cdot 9$ $4 \cdot 1$ $24 \cdot 3$ $4 \cdot 1$ $3 \cdot 8$ $42 \cdot 5$ $38 \cdot 2$

A. Corrected for outward transfers.

B. Corrected for outward and inward transfers.

Deaths of Infants under 1 Year of Age, Classified as to Race, Age, and Cause of Death, Corrected for Outward Transfers.

(Figures for the Native Locations of Langa and N'dabeni excluded.)

		ar providence com	7	7	(1	rigun	CS 10	r the	TARK	ive .	roca.	tions	of L	anga	and	N'd	laber	i exc	clude	ed.)						
EUROPEAN. Total Corrected for Outward and Inward Transfers.	Persons	61	1	61	1		1			¢1				9	13	23	7	4	31	6	11		ı	13	125	125
JROE Sal Co Outw	FE	1	1	1		1				67			1	9	70	12	-	63	20	9	00		1	9	6	69
ET Tot for Inw	M	-	1	2		1									∞	11	9	67	11	60	m	1		1	56	26
L Year.	Persons	212		610	14	67	13	11	13	61		1,0	19	110	13 159	22 242	13	4 26	31	9	111		11	13	124 925	1,049
TOTAL Under One Year.	F		 	1 63	1 61		1 4	1	0,1	31		[61	11	900	85.57	112 119	119	102	20 56	96	00.10			33.6	69	513 1
Unde	M	13		67 00			100		∞	30		100	00	20	8 74	10 123	100	16	111	80	80			45	55	
Under 12 months	12	610	11		-1		1101		61					1	12.2	25 1							11	1 -	9 4	67 5
Under 11 months	11	1 60	11	11			00		67	61			11	61 00	20	18		0.1			11		11	171	41	75
Under 10 months	10	100			11	11		11	1-	67	11		-	1 ∞	181	30	11	1 1		11	-	11	111	0110	74	79
Under 9 months.	6	63	11	1-	1 "		1-					-		13	3	$\frac{1}{12}$	11	11	11	11	11	11	111	14	54	59
Under 8	∞	100	11			11	1-	11	63	11	11	11	00	9	17	21		11		11	11	11	111	6100	61	99
Onder 7 months.	7	1-	11	11			1 4		67	1 2			"	1 ∞	12	36	0.1		- 1	-1	11	111	111	1 9	782	83
Under S months,	60					1			1	1 4	11		1-	∞	15	17		67	"	111				101		26
4 months. Under	5					1	1 1		2	1 4			2	2 10	212	5 27	*HH.	1 1 3 1	2 1					1	66.5	3 71
3 months. Under	3 4	1 1	1 1	1			1 1			1 2		1 1	04	14 15	10 11 11 11 11 11 11 11 11 11 11 11 11 1	3 4 10 36		1 8	1 69					0 0 0	7 12 56 76	3 88
Over 4 weeks and under 2 months.	91	1 1	11				11			12			11	11 1	10 1	212	6161	61	11	-				7 10	60 5	69 63
Total under 4 weeks.	1	11	11	11		11	11			18	11		0	L170	111	110	47	15	28 109	11	10 13		1 1	13	55 218	273
Under weeks.	4	11	11	ĪĪ	11	11	1	11		L 4	11			61	ا ش	ا ده		63	7	11	11	11	11	11	23	24
Under S weeks.	က		11	13	11		11	11			11		0.1	c3	12	-] ∞	-1	11	11		1 60	3 24	27
Under 2 weeks	23	11	11	11	11	11	11		-	03	11		67			-	63	1-	6 14		1 -	11	11	100	30	37
Total under I week.	П	11	11	11	11	11		11	11	1=	11	11	14	11	12	1-	ကက	12	80	10	10			27	44 141	185
Under 7 days.	4	11	11	11	11		11,			1-		11	01	11	11	11	11	11	9	1 -	67	11	11	01	12	14
Under 6 days.	9	11	11	11	11		11		11	63			11		-		11	61	11	11	H				6 2	∞,
Under 5 days.	2			11	111	11	111							11			11	1	19		1			11	-1 00	6
S days. Under	4									1 2			121		11		2 1	1 1	1 9	01.55	312				0 16	9 20
2 days.	23							, , ,		1 60					111			4	4 4 9	2 1 2	2				4 10 28 19	32 29
Under 1 day.	1 2									67			111		-		63	67	12 33 1	6	40			3 1	21 25 2	73 3.
RACE.		Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. 1 Non-E. 3	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E.	Eur. Non-E. 5	
Ħ H		, KE		ÄÄ.	ÄÄ	.			AZ	AZ .	四四	AZ	.	EZ			第四十二	PZ	商	AZ .	·		AZ .	AZ	PZ .	Races.
DISEASE.		Measies	Scalt Fever	Whooping Cough	Diphtheria and Croup	Erysipelas	Tuberculosis, Meningeal	Tuberculosis, Abdominal	Tuberculosis, Other Forms.	Syphilis	Rickets	Simple Meningitis	Convulsions	Bronchitis	- 1	Diarrhoea and Enteritis	Congenital Malformations.	Congenital Debility .	Premature Birth	Injury at Birth	Other Diseases Peculiar to Early Infancy	Suffocation (Overlying)	Neglect — Infants	Other Causes	TOTALS	
Classification No.		œ	9	10	11	22	31	32	30, 33 to 40	42	157	301	311	402 to 403A	404 to 406	456	700 to 703	750	751	752	753	Part 869	893			
									6.0						1					1						

Amongst European infants 35.5 per cent. of the deaths under one year occurred in the first week of life, and 44.4 per cent. in the first month. Amongst the non-European infants the percentages were 15.2 in the first week and 23.6 in the first month.

In the next table the infant deaths are arranged according to the month of registration. They are also classified for race and sex.

Month.	No. of Weeks.	E	urope an B.	·	E	uropean A.	•	Non-European. A.		
		M.	F.	Total.	M .	F.	Total.	М.	F.	Total.
July	5	2	3	5	2	3	5	43	50	93
August	4	1	6	7	1	6	7	38	32	70
September		6	3	9	6	3	9	52	26	78
October	4 5	7	7	14	7	7	14	52	41	93
November	4	_	6	6		6	6	34	28	62
December	4	5	7	12	4	7	11	31	37	68
January	5	2	9	11	2	9	11	48	54	102
February	4	5	7	12	5	7	12	40	33	73
March	4	10	4	14	10	4	14	24	22	46
April	5	7	5	12	7	5	12	37	44	81
May	4	5	3	8	5	3	8	34	44	78
June	4	6	9	15	6	9	15	48	33	81
										004
Year	52	56	69	125	55	69	124	481	444	925

A. Corrected for outward transfers.

B. Corrected for outward and inward transfers.

From this table it will be seen that the non-European infant mortality was greater in the winter half of the year (July-September and April-June) than in the summer (October-March). This is associated with the fact that respiratory diseases caused more deaths than diarrheal diseases. It is the first year that these associated phenomena have occurred. Amongst European children the summer mortality exceeded the winter mortality and the diarrheal deaths were more numerous than the respiratory.

In the following table the quarterly figures (annual infant mortality rates corrected for outward transfers) are shown:—

Quarters.	European.	Non-European.
July, August and September, 1934 October, November and December, 1934 January, February and March, 1935 April, May and June, 1935	$34 \cdot 1 \\ 47 \cdot 0 \\ 63 \cdot 7 \\ 59 \cdot 7$	$148 \cdot 3$ $139 \cdot 5$ $138 \cdot 0$ $159 \cdot 6$

The next table is designed to show the infant mortality for the year under report (corrected for outward transfers) amongst legitimate and illegitimate infants respectively:—

	European.	Non- European.	All Races.
Number of Legitimate Births	2,326 111 47·7	4,942 688 139·2	7,268 799 109·8
Number of Illegitimate Births	$ \begin{array}{c c} 116 \\ 13 \\ 112 \cdot 1 \end{array} $	$1,386$ 237 $171 \cdot 0$	$1,502$ 250 $166 \cdot 4$

In Table D, on page 130, the infant mortality figures will be found classified for wards and race.

The native locations of Langa and N'dabeni are not included in the foregoing figures with regard to infant mortality. Particulars regarding the locations will be found in Table J, on page 136.

MATERNAL MORTALITY.

The following table shows the number of deaths of women which occurred in the year 1934-35 from causes connected with pregnancy and the puerperium, classified for causes and for race, and the corresponding mortality rates per 1,000 live births (corrected for outward transfers):—

		Deaths.		Maternal mortality rates per 1,000 live births.					
	Eur.	Non-E.	All Races.	Eur.	Non-E.	All Races.			
Puerperal septicæmia	4	12	16	1 .64	1.90	1 .82			
Abortion, ectopic gestation and other accidents of pregnancy Puerperal albuminuria and convulsions Puerperal hæmorrhage and other accidents of labour Other puerperal conditions	- 1 4 -	4 3 8 3	4 4 12 3	0·41 1·64	0 ·63 0 ·47 1 ·26 0 ·47	0 ·46 0 ·46 1 ·37 0 ·34			
All causes, other than puerperal septicæmia	5	18	23	$2\cdot05$	2 ·84	2 .62			
Total	9	30	39	3 .69	4 . 74	4 · 45			

In the following table the annual maternal mortality rates (per 1,000 live births) for the Municipality are shown for a series of years:—

	Puerperal Septicæmia.			Ot	ther Caus	ses.	All Causes.			
	Eur.	Non-E.	All Races.	Eur.	Non-E.	All Races.	Eur.	Non-E.	All Races.	
A. 1914-15 to 1918-19 1919-20 to 1923-24 1924-25 to 1928-29 1929-30 to 1933-34 B. 1927-28 1928-29 1929-30 1930-31 1931-32 1932-33 1933-34 1934-35	$\begin{array}{c} 0.59 \\ 1.76 \\ 1.08 \\ 0.89 \\ 1.64 \\ \hline \\ \hline \\ 1.78 \\ 0.68 \\ 2.03 \\ 0.35 \\ 0.79 \\ 0.78 \\ 1.64 \\ \end{array}$	$\begin{array}{c} 1 \cdot 30 \\ 1 \cdot 20 \\ 2 \cdot 10 \\ 1 \cdot 27 \\ 1 \cdot 42 \\ \hline \\ 1 \cdot 79 \\ 1 \cdot 18 \\ 1 \cdot 52 \\ 1 \cdot 28 \\ 1 \cdot 57 \\ 0 \cdot 97 \\ 1 \cdot 05 \\ 1 \cdot 90 \\ \end{array}$	$ \begin{array}{c} 1 \cdot 02 \\ 1 \cdot 40 \\ 1 \cdot 76 \\ 1 \cdot 15 \\ 1 \cdot 48 \end{array} $ $ \begin{array}{c} 1 \cdot 67 \\ 1 \cdot 37 \\ 1 \cdot 24 \\ 1 \cdot 52 \\ 1 \cdot 19 \\ 0 \cdot 92 \\ 0 \cdot 98 \\ 1 \cdot 82 \end{array} $	$\begin{array}{c} 2 \cdot 13 \\ 2 \cdot 84 \\ 1 \cdot 66 \\ 2 \cdot 83 \\ 2 \cdot 05 \\ \hline \\ 1 \cdot 08 \\ 1 \cdot 42 \\ 2 \cdot 73 \\ 2 \cdot 71 \\ 4 \cdot 20 \\ 2 \cdot 78 \\ 2 \cdot 73 \\ 2 \cdot 05 \\ \end{array}$	3.55 2.16 3.62 2.94 2.53 3.22 3.53 3.04 2.56 2.82 4.04 3.16 2.84	$\begin{array}{c} 2 \cdot 98 \\ 2 \cdot 41 \\ 2 \cdot 99 \\ 2 \cdot 91 \\ 2 \cdot 39 \\ \hline \\ 2 \cdot 51 \\ 2 \cdot 85 \\ 2 \cdot 94 \\ 2 \cdot 61 \\ 3 \cdot 25 \\ 3 \cdot 68 \\ 3 \cdot 04 \\ 2 \cdot 62 \\ \end{array}$	$\begin{array}{c} 2 \cdot 72 \\ 4 \cdot 60 \\ 2 \cdot 74 \\ 3 \cdot 72 \\ 3 \cdot 69 \\ \hline \\ 2 \cdot 51 \\ 3 \cdot 20 \\ 3 \cdot 41 \\ 4 \cdot 74 \\ 4 \cdot 55 \\ 3 \cdot 57 \\ 3 \cdot 51 \\ 3 \cdot 69 \\ \hline\end{array}$	$\begin{array}{c} 4 \cdot 85 \\ 3 \cdot 36 \\ 5 \cdot 72 \\ 4 \cdot 21 \\ 3 \cdot 95 \\ \hline \\ 5 \cdot 01 \\ 4 \cdot 71 \\ 4 \cdot 56 \\ 3 \cdot 84 \\ 4 \cdot 39 \\ 5 \cdot 01 \\ 4 \cdot 21 \\ 4 \cdot 74 \\ \end{array}$	$\begin{array}{c} 4 \cdot 00 \\ 3 \cdot 81 \\ 4 \cdot 73 \\ 4 \cdot 06 \\ 3 \cdot 88 \\ \hline \\ 4 \cdot 18 \\ 4 \cdot 22 \\ 4 \cdot 18 \\ 4 \cdot 13 \\ 4 \cdot 44 \\ 4 \cdot 60 \\ 4 \cdot 02 \\ 4 \cdot 45 \\ \end{array}$	

A. Municipality exclusive of Ward 15 (Wynberg). B. Extended Municipality.

SECTION III.—INFECTIOUS AND OTHER DISEASES.

The number of notifications of compulsorily notifiable diseases that were received during the year under review was as follows:—

		Corre	cted.	Cases brou Capetown Area for treatment,	Municipal hospital	Cases in native Loca- tions of Lang a
Disease.	Uncor- rected.	For errors of	For errors of diagnosis and	for errors of sis (not in	f diagno- cluded in	and N'daben' corrected fo errors of di ag- nosis and by exclusion of imported
		diagno- sis.	by exclusion of imported cases.	From areas of outside authorities.	From ships in Cape- town Har- bour.	cases (not included in foregoing columns).
Diphtheria	456	376 245	374 243	36	_	$\frac{4}{2}$
Scarlet fever	254 136	91	82	26	1	6
Enteric fever	96	92	91	17		
Puerperal fever Erysipelas	99	94	94	3	1	1 1
Cerebrospinal fever	75	25	25	$\cdot 2$		_
Infective encephalitis	18	11	11	$\frac{1}{2}$		_
Acute poliomyelitis	27	26	25	2		3
Leprosy	2	2	2	_		3 1 2
Typhus fever	2					2
Malta fever		1	1	1		
Anthrax	298	299	297	18		4
Ophthalmia neonatorum * Trachoma	15	15	15	11		
Lead poisoning	1	1	1	1		_
Influenzal pneumonia	132	127	127	1	1	2 7
Acute primary pneumonia			704	44	1	
Tuberculosis, respiratory system			1,092	78	2	54
Tuberculosis, other forms	165	186	183	19	_	9
Totals	3,633	3,415	3,367	261	6	96

^{*} Including cases of Gonorrheal ophthalmia not in newly born.

No cases were reported of the following notifiable diseases: Asiatic cholera, smallpox, plague, glanders, rabies, human trypanosomiasis and yellow fever.

In Tables F, G and H, on pages 131, 132 and 133, the notified cases (corrected) are classified:—

Table F.—In months, according to the date of notification certificate, and by race and sex.

Table G.—In wards and by race and sex.

Table H.—In age groups and by race and sex.

The number of cases notified during a series of past years is set out in Table I, on page 135, and corresponding information will be found in regard to deaths from these and certain other infectious diseases in the tables on pages 24 and 25.

Other statistical details as to deaths from infectious diseases are contained in Table A, on page 112, and in the table on page 28.

CITY INFECTIOUS DISEASES HOSPITAL.

The annual report of the Medical Superintendent of Hospitals will be found on pages 100 to 108.

The City Hospital for Infectious Diseases, Portswood Road, Capetown, contains accommodation for 300 patients.

At the Isolation Hospital, Rentzkie's Farm, there are 42 beds. Adjacent to the latter hospital is the Union Health Department's Isolation Hospital and Quarantine Station for use in connection with the Port Health Administration and for other purposes, which provide accommodation for 52 patients and 87 contacts

in addition to an emergency hospital block for 24 patients. The whole of the accommodation at Rentzkie's Farm is administered by the City Health Department.

Owing to certain allegations having been made in regard to the treatment of nurses at the City Hospital, Portswood Road, the Secretary for Public Health, on the invitation of the City Council, appointed Dr. F. C. Willmot, Senior Assistant Health Officer for the Union, and Miss M. Blinck, Matron of the Wynberg Military Hospital, to investigate the matter and report. Dr. Willmot and Miss Blinck having inerviewed the whole of the medical and nursing staff and other persons concerned and completed their investigations, submitted their report on 20th August, 1934. The report was transmitted to the Council.

With regard to the dietary of the nurses, this was reported as being sufficient and well balanced, but a greater variety or choice of food was recommended. The unsatisfactory conduct of the maids at one time serving in the nurses' dining room was regarded as largely the cause of dissatisfaction. Reference was made to the question of providing a separate kitchen for the nurses' home.

The nursing staff, which was limited by the bedroom accommodation available, was reported as being inadequate, and a recommendation was made that it should be increased, and that it should comprise a greater proportion of permanent staff (sisters and staff nurses) as distinct from probationers and student nurses, who are subject to frequent changes. In the absence of the necessary accommodation in the nurses' home, it was recommended that the Council should hire additional accommodation for nurses in the neighbourhood.

A recommendation was made that the old arrangement of serving night nurses with dinner on assumption of duty in the evening should be reverted to. This had reference to a change that had been made some time previously, whereby dinner was served to night nurses after the end of their night's duty.

A reduction was recommended in the salary (£10 a month) of student nurses (i.e. registered nurses engaged for a six months' period of service and instruction, at the end of which time they are awarded a certificate in the nursing of infectious diseases on passing the City Council's examination).

Reference was made to the long hours of duty of the two porters employed at the hospital.

These recommendations were given careful consideration and practically all of them have been carried out. Accommodation for 9 nurses (afterwards increased to 11) at 83, Somerset Road, Capetown, was engaged on the 1st June, 1935. An additional porter was added on 4th March, 1935. The salary of the student nurses was changed to £7 10s. a month as from 1st January, 1935. A special kitchen and pantry will be provided in connection with the new nurses' dining room (see below).

The existing hospital is insufficient for the needs of the Municipality. There are not sufficient beds for cases of tuberculosis. For enteric fever, scarlet fever and diphtheria, there is only one block each. These are insufficient when any of these diseases is unusually prevalent, and afford no facilities for suitable administration in the event of cross-infection occurring. There are not enough isolation wards for other infectious conditions and for double infections. The accommodation for the native staff is unsuitable.

A scheme for the enlargement of the hospital at a cost of nearly £100,000 has been adopted by the Council and the necessary capital funds voted. It has been approved by the Minister of Public Health, who will contribute one-half of the cost in terms of the Public Health Act, 1919. The scheme includes the following items:—

A new two-storey isolation block comprising 16 two-bed wards.

A first-floor storey to each of the single-storey blocks for enteric fever, scarlet fever, diphtheria and tuberculosis. The existing ground-floor buildings will also be subjected to structural alterations. This will provide additional accommodation for 39 patients each in the enteric, diphtheria and tuberculosis blocks (as well as for additional patients on the stoeps of the last-mentioned) and for 24 patients in the scarlet fever block.

Extensions of the venereal disease wards to accommodate 12 more patients.

A new block for the X-ray examination of tuberculosis patients, and for the induction of artificial pneumothorax, etc. This block will serve outpatients as well as in-patients.

The extension of the house-physician's cottage.

The extension of the nurses' home to provide 74 additional bedrooms, dining room, kitchen, etc., sitting rooms, lecture room, etc. The building will be raised to three storeys.

Alterations to the administrative block to make available for maidservants bedroom accommodation at present occupied by nurses.

A new block providing garages, office, workshop, change room and sanitary conveniences on the ground floor and accommodation for native servants on the first floor.

Alterations and extensions of the old discharge block to provide a dispensary and drug store.

A new porter's lodge at the entrance gate.

A start has been made with these extensions since the end of the year under report.

AMBULANCE AND DISINFECTING STATION.

This is situated in the grounds of the City Hospital, Portswood Road. There is garage accommodation in which are housed (beside other departmental cars) five vans and ambulances which are used for the removal of cases of infectious disease and for the transport of infectious and disinfected bedding and of supplies for the hospitals and clinics.

The disinfecting station comprises two Equifex steam disinfectors.

The ambulance and disinfecting service is staffed by two removal officers, three motor drivers and two labourers. This staff is also responsible for the disinfecting of houses and other premises for infectious diseases and other conditions. A mechanic, assisted by a labourer, is in charge of the disinfecting station, and supervises the machinery of the hospital laundry and the hospital sewage chlorination plant. The disinfection of bedding, etc., for the City Hospital is also done at the disinfecting station.

There is another Equifex steam disinfector at Rentzkie's Farm Hospital provided for the needs of that hospital but available also for the purposes of the City health administration.

The work done during the year by the ambulance and disinfecting service is indicated by the following figures:—

	e Journeys turn).	Disinfections.							
m. 6:4	To other	Pren	nises.	Arti	icles.	s destroyed			
To City Hospital.	Hospitals or Premises.	For Tuber- culosis.	For other Infectious Diseases.	For Tuber- culosis.	For other Infectious Diseases.	Articles			
1,399	25	915	1,073	3,899	9,054	270			

The distance covered during the year by the vans and ambulances was 53,031 miles.

CLEANSING STATION.

A station is equipped for the cleansing of verminous persons at 116, Aspeling Street. It is a small three-roomed house fitted with two baths, steam disinfector and drying closet. Cases of scabies are treated with sulphur baths or by hot baths and sulphur application. The work done during the year ended 30th June, 1935, is indicated in the following table:—

	I	First At	tendance	es.	r	otal At	tendance	es.
Persons.	Scabies.	Body Lice.	Head Lice only.	Total.	Scabies.	Body Lice.	Head Lice only.	Total.
Children under 16 years of age : European boys European girls Non-European boys Non-European girls	50 78 225 189		$\frac{10}{12}$	50 88 225 201	145 221 673 593		$\frac{1}{20}$	145 233 673 613
Total children	542		22	564	1,631	_	32	1,663
Adults: European males European females Non-European males Non-European females	34 37 33 56	2 1 —		36 37 34 56	98 101 85 180	3 1 —		101 101 86 180
Total adults	160	3		163	464	4		468
Total Persons: European Non-European All Races	199 503 702	$\frac{2}{1}$	10 12 22	211 516 727	565 1,531 2,096	$\begin{matrix} 3 \\ 1 \\ 4 \end{matrix}$	12 20 32	580 1,552 2,132

N.B.—Many of the cases of scabies were infested also with lice.

TUBERCULOSIS.

The new cases of tuberculosis notified during the year ended 30th June, 1935, corrected for misdiagnosis and imported cases, numbered 1,275 (181 European and 1,094 non-European). These included 1,092 cases of tuberculosis of the respiratory system (161 European and 931 non-European) and 183 cases of other forms of tuberculosis (20 European and 163 non-European).

The original number of cases notified was 1,325, of which 1,160 (173 European and 987 non-European) were reported as pulmonary cases, and 165 (20 European and 145 non-European) as other forms of tuberculosis.

49 of those notified as pulmonary cases (9 European and 40 non-European) and 10 of those notified as suffering from other forms of tuberculosis (2 European and 8 non-European) were found in the City Hospital not to be suffering from tuberculosis.

8 cases (2 European and 6 non-European) admitted to the City Hospital notified as suffering from other diseases were found to be suffering from pulmonary tuberculosis and 31 (3 European and 28 non-European) from other forms of tuberculosis. Of these 31, 25 (3 European and 22 non-European) were cases of tubercular meningitis.

27 of the notified cases (corrected) of pulmonary tuberculosis (5 European and 22 non-European) and 3 (1 European and 2 non-European) of other forms of tuberculosis had come to Capetown already suffering from tuberculosis.

In addition to the cases enumerated above there were 89 patients (17 European and 72 non-European) admitted to the City Hospital or other hospitals from outside the Municipality and from ships in the harbour diagnosed as suffering from pulmonary tuberculosis, and 16 patients (1 European and 15 non-European) diagnosed as suffering from other forms of tuberculosis. After correction for errors of diagnosis the actual number of such cases was 80 of pulmonary tuberculosis (15 European and 65 non-European) and 19 of other forms of tuberculosis (1 European and 18 non-European).

The new notifications, corrected for misdiagnosis and imported cases, are classified for race, sex and form of disease, as follows:—

	H	European	l.	Non-European.			All Races.		
	M.	F.	Total.	м.	F.	Total.	м.	F.	Total.
Pulmonary Other Forms	77 13	84 7	161 20	464 88	467 75	931 163	541 101	551 82	1,092 183
Total	90	91	181	552	542	1,094	642	633	1,275

These figures are equivalent to incidence rates per 1,000 population concerned as set out below:—

		Europea	n.	No	Non-European.			All Races.		
	M.	F.	Total.	м.	F.	Total.	м.	F.	Total.	
Pulmonary Other forms	1·07 0·18	1 ·11 0 ·09	1.09	$\begin{array}{c} 6.60 \\ 1.25 \end{array}$	$\begin{array}{c} 6.55 \\ 1.05 \end{array}$	6 ·58 1 ·15	3 ·80 0 ·71	3 ·75 0 ·56	3·78 0·63	
Total	1 .25	1 ·20	1 ·23	7 .85	7 .60	7 .73	4 ·51	4 ·31	4 ·41	

The deaths from tuberculosis during the year were as follows:-

	*	Europea	n.	† Non-European.			† All Races.		
	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.
Respiratory System Other forms	58 9	5 4 5	112	268 53	271 37	539 90	324 62	324 42	648 104
Total	67	59	126	321	308	629	386	366	752

^{*} Corrected for outward and inward transfers.

These figures are equivalent to death rates per 1,000 population concerned as set out below:—

	*E	luropean		† No	n-Europe	ean.	† All Races.		
	M.	F.	Total.	м.	F.	Total.	M.	F.	Total.
Respiratory System Other Forms	0 ·81 0 ·12	0 ·72 0 ·06	0 ·76 0 ·10	$\begin{array}{c} 3.82 \\ 0.76 \end{array}$	3·81 0·52	3·82 0·64	2 ·28 0 ·44	2·21 0·29	2 ·25 0 ·36
Total	0 .93	0 .78	0 .86	4 .58	4 ·33	4 ·46	2 .72	2 .50	2.61

Corrected for outward and inward transfers.

There were 30 deaths from tuberculosis in the native locations of Langa and N'dabeni (excluded from the above figures) and of these 18 males and 7 females died of phthisis and the remaining 5 cases (4 males and 1 female) died of other forms of tuberculosis. The number of cases of tuberculosis notified from the locations will be found in Table J, on page 136.

[†] Corrected for outward transfers only.

[†] Corrected for outward transfers only.

The tuberculosis death rate amongst non-Europeans was 5·3 times as great as that amongst Europeans (corrected for outward transfers). In Europeans the death rate amongst males was 1·2 times as great as amongst females and in non-Europeans 1·1 times as great.

The age distribution of deaths is shown in Table A, on page 112, from which it will be seen that for tuberculosis of the respiratory system 78 per cent. of the European deaths and 72 per cent. of the non-European deaths were in persons aged from 15 to 55 years, while in the case of other forms of tuberculosis 49 of the 90 deaths of non-Europeans were of children under 5 years of age and 6 of the 14 European deaths. There were 2 deaths from tuberculosis of the respiratory system amongst Europeans under 5 years of age and 83 (or 15 per cent. of the number at all ages) amongst non-Europeans under 5.*

The notifications of cases of non-pulmonary tuberculosis during the year under review, corrected for imported cases and errors of diagnosis, are classified below according to the parts of the body affected:—

Euro	ppean.	Non-Eu	ropean.	Total.
Male.	Female.	Male.	Female.	
8	4	27	28	67 21
1	1	27	17	46
1	<u> </u>	10	15	26 3
	1	13	6	20
13	7	88	75	183
	Male. 8 3 1 1	8 4 3 1 1 1 1 1 1 — 1	Male. Female. Male. 8 4 27 3 — 10 1 1 27 — 1 10 1 — 1 — 1 — — 1 13	Male. Female. Male. Female. 8 4 27 28 3 — 10 8 1 1 27 17 — 1 10 15 1 — 1 1 — 1 1 6

[†] Includes tabes mesenterica and tuberculosis of bowels, peritoneum and abdominal or mesenteric glands.

The deaths from non-pulmonary tuberculosis registered during the year (corrected for outward transfers) are similarly classified below according to death certification:—

		Euro	pean.	Non-E	uropean.	
		Male.	Female.	Male.	Female.	Total.
Tuberculosis,	meningeal	7	3	24	25	59
,,	abdominal	2		8	5	15
,,	of bones and joints			7		7
,,	of lymphatic system	_		1		1
,,	of the genito-urinary					
"	system			1		1
	of other organs	-		_	1	1
"	disseminated	_	2	12	6	20
	Total	9	5	53	37	104

These deaths are further classified in Table A, on pages 112 and 113.

[•] In this paragraph the figures for Europeans are corrected for inward and outward transfers and those for non-Europeans for outward transfers only. The deaths of residents in the native locations of Langa and N'dabeni are not included.

The following tables show the length of residence in the City of Capetown of cases notified during the year 1934-35 and not fatal up to the end of the year, and of all cases which died during the year, respectively:—

Showing length of residence in the City of Capetown of persons notified as suffering from Tuberculosis and not since dead, from 1st July, 1934, to 30th June, 1935 (corrected for imported infection and misdiagnosis).

100.	0 2 2 2 2 2	111, 10									
Age.	Race.	under 6	InCapetown, 6 months & under 1 year.	vear &	vears &	vears &	vears &	over o	All Life in Cape- town.	No Record	Total.
0—1 year.	E. Non-E		_				_		3		5
1—5 years.	E. Non-E		2	1	<u> </u>			_	3 48	6	3 58
5—15 years.	E. Non-E		_	_	1	1		12	6 72	17	7 103
15—25 years.	E. Non-E		3		<u> </u>	4	3	$\begin{array}{c} 12 \\ 22 \end{array}$	25 90	19	39 146
25—45 years.	E. Non-E				$\frac{1}{2}$	1	3	31 92	20 118	1 36	54 256
45 years and over.	E. Non-E		1	_	1		1	14 52	4 18	7	20 78
Age unknown	E. Non-E		_	_		_	_	_	_	3	
Totals	E. Non-E		8	3	2 8	2 6	1 7	57 178	58 349	3 90	123 649

Showing length of residence in Capetown of Persons dying from Tuberculosis during the 52 weeks ended 28th June, 1935. (Corrected for outward transfers).

Age.	Race.	town,	town, 6	town, l	town, 2 vears &	town, 3 years &	InCape- town, 4 years & under 5 years.	town, over 5	All Life in Cape- town.	No Record.	Total.
0—1 year.	E. Non - E.	_		=		_		_	$\begin{array}{c} 1 \\ 21 \end{array}$		$\frac{1}{26}$
1—5 years.	E. Non - E.	3	_		1	1	_	<u>-</u>	7 90	10	7 106
5—15 years.	E. Non - E.			1		1		1	4 59	4	5 68
15—25 years.	E. Non - E.		1		1	1	1	3 27	18 89	2 6	$\begin{array}{c} 24 \\ 127 \end{array}$
25—45 years.	E. Non - E.	1 2	1 1	3	2	1 3	7	21 90	16 79	4 22	46 208
45 years and over.	E. Non - E.	1		1	2	1		25 53	7 27	3 11	40 94
Age unknown	E. Non - E.							_			_
Totals	E. Non - E.	2 6	$\begin{bmatrix} 1 \\ 2 \end{bmatrix}$	2 5	4 4	3 5	12	49 172	53 365	9 5 8	123 629

In addition to the deaths recorded above, 2 European males, 1 European female, 9 non-European males and 4 non-European females, notified cases of tuberculosis, died during the year and were certified as dying of causes of death other than tuberculosis. Of the European males, 1 was certified as dying of influenzal pneumonia and 1 of acute primary pneumonia. The European female was certified as dying of myocarditis. Of the non-European males, 1 was certified as dying of hypertension, 1 of pericarditis, 1 of cerebrospinal fever, 1 of bronchiectasis, 1 of gastro-enteritis, 1 of abscess of lung, 1 of simple meningitis and 2 of nephritis. Of the non-European females, 2 were certified as dying of acute primary pneumonia, 1 of carcinoma and 1 of gastro-enteritis.

74 deaths (11 European and 63 non-European) took place without any previous

notification of the disease having been received.

In Table A, on page 113, and Table D, on page 130, the deaths from tuberculosis will be found classified in wards.

The ward distribution of the notified cases of tuberculosis will be found in Table G, on page 133, and the age distribution in Table H, on page 134.

The annual deaths and death rates from tuberculosis for the past twenty-one years, corrected for outward transfers, are shown in the following table:—

Year.	Ι	Deaths.	Death-rate per	r 1,000 population.
	European.	Non-European.	European.	Non-European.
	Municipality	excluding Wynbe	rg Ward.	
1914-1915	 89	384	1 · 11	5.09
1915-1916	 74	323	0.89	4 · 21
1916-1917	 95	430	1.10	5 · 55
1917-1918	 78	35 3	0.87	4.50
1918-1919	 75	302	0.81	3.80
1919-1920	 80	304	0.83	3 • 77
1920-1921	 73	334	0.73	4 · 10
1921-1922	 101	286	0.98	3 · 43
19 22-1923	 79	3 55	0.75	$4 \cdot 12$
1923-1924	 79	3 9 9	0 • 7 3	$4 \cdot 47$
1924-1925	 95	422	0.85	$4 \cdot 51$
1925-1926	 70	367	0.63	3.87
1926-1927	 97	449	0.85	$4 \cdot 59$
	Municipality	including Wynbe	rg Ward.	
1927-1928	 107	522	0.83	4.57
1928-1929	 85	528	0.65	4 · 48
1929-1930	 93	613	0.69	5.05
1930-1931	 94	598	0.68	4.69
1931-1932	 111	686	0.80	$5 \cdot 32$
1932 -1 933	 127	662	0.90	4.98
1933-1934	 128	690	0.89	5.04
1934-1935	 123	629	0.84	4 · 46

The work done during the year under review in connection with tuberculosis is indicated by the following returns:—

Visits by health visitors to cases of tuberculosis	6,547
Number of new cases who attended tuberculosis clinics	966
Total attendances at tuberculosis clinics	6,620
Number of Capetown cases of tuberculosis admitted to the	
City Hospital	389
Number of Capetown cases of tuberculosis admitted to	- 10
the Nelspoort Sanatorium	142
Number of Capetown cases of tuberculosis admitted to	4.0
the Duinendal Settlement	19
Number of new cases put on allowance of bread and milk	123
Cost of bread and milk supplied to indigent patients (year	
ended 30th June, 1935) £746 1	14s. 1d.

Visiting has been done mainly by three health visitors who devote the whole of their time to this work and also attend the tuberculosis clinics. The number of tuberculosis health visitors was increased from three to four in May, 1935, when a second tuberculosis clinic was opened in premises specially built for the purpose in Church Street, Wynberg.

NELSPOORT SANATORIUM.

The Nelspoort Sanatorium was built from a capital fund composed of £25,000 given by Mr. John Garlick, of Capetown, whose generous initiative made the scheme possible, £25,000 (increased by subsequent contributions) by various local authorities in the Cape Province (including £9,800 from the Capetown Corporation up to the end of the year under report), and £50,000 (subsequently increased) by the Union Government. The institution is at the Salt River Farm, Nelspoort, Cape Province, on the Karoo at an elevation of about 3,260 feet above sea level, and is on the main railway line at a distance of 371 miles from Capetown. There is accommodation for about a hundred patients. The farm is worked in connection with the Sanatorium.

The Union Government controls the Sanatorium and there is an advisory committee which includes the Mayor, the Town Clerk, and the Medical Officer of Health of Capetown. The institution is primarily intended for the needs of the Cape Province. Paying patients are received at a charge of 12s. 6d. a day. Partpaying and free patients are received on the application of local authorities on a lower scale of charges. This was 9s. a day for European patients and 7s. for non-Europeans until 1st October, 1934, after which date it was reduced to 8s. and 6s. Until 30th June, 1935, the cost, after deducting part-payments made by patients, was shared equally by the Union Government and the local authority concerned. Since that date, pursuant to the Public Health Amendment Act, 1935, the cost has been met as to 50 per cent. by the Union Government and as to 25 per cent. each by the Provincial Administration and local authority concerned.

The numbers of all patients and Capetown patients in the Sanatorium on the last day of each month for the year ended 30th June, 1935, have been as follows:—

Date.				Total.		Capetown.			
			Eur.	Non-E.	Total.	Eur.	Non-E.	Total.	
1934.									
31st July			61	32	93	28	19	47	
31st August			60	34	94	34	17	51	
30th September			63	36	99	30	24	54	
31st October			60	34	94	28	23	51	
30th November			64	36	100	30	24	54	
31st December	٠.		5 8	35	93	21	21	42	
1935.									
31st January			61	34	95	23	19	42	
28th February			61	34	95	22	16	38	
31st March			66	32	98	24	16	40	
30th April			65	33	98	24	15	39	
31st May			66	34	100	28	17	45	
30th June			62	34	96	31	19	50	

In regard to Capetown, application for admission is made by the Medical Officer of Health to the Medical Superintendent of the Sanatorium. The cases are selected by the Medical Superintendent of Hospitals from those under his care at the City Hospital or the Tuberculosis Clinics, or referred to him for examination. Many cases have a preliminary period of treatment in the City Hospital. The cost of transport to and from the Sanatorium is shared by the Government and the Corporation. Special compartments are used for this purpose with precautions in regard to disinfection. All the patients have been seen off from Capetown station by a representative of the City Health Department.

The expenditure of the City Council in connection with the treatment of patients at Nelspoort Sanatorium from 1st July, 1934, to 30th June, 1935, amounted to £3,427 3s. 11d., as follows:—

Treatment at the Sanatorium	£3,129	12	2
Railway fares	249	6	0
Meals on trains	27	1	9
Sundries	21	4	0
Total	£3,427	3	11

The Union Government contributed an approximately equal sum.

During the year ended 30th June, 1935, there were 142 admissions to the Sanatorium from Capetown. Of these admissions, 19 were of patients who had had a previous period of treatment in the institution, so that the number of new cases from Capetown who were admitted during the year ended 30th June, 1935, was 123. The following is an analysis of the 142 admissions from Capetown during the year:—

	European. Non-European.						
A			Euroj	bean.	Non-Eu	ropean.	Total.
Age.			Male.	Female.	Male.	Female.	Total.
5 to 10 years	• •	• •					-
10 to 15 ,, 15 to 25 ,,		• •	10	13	5	20	48
25 to 35 ,,	• •	• •	2 0 9	14 5	9 3	11 5	$\begin{array}{c} 54 \\ 22 \end{array}$
4 5 to 55 ,,	• •	• •	1	2	6	i	10
55 to 65 ,,	• •	• •	1		3		4
Total	• •	••	41	34	28	39	142
D							
Paying patients Part-paying patients			_	3			3
Free patients		• •	41	31	28	39	13 9
Total			41	34	28	39	142
Period of treatment at Sa	inatorium-						_
Under 30 days	• •	• •	1	<u> </u>	- 1	_	$\frac{1}{2}$
From 30- 39 days			1	$egin{array}{c} 1 \ 2 \ 2 \end{array}$		1	$rac{2}{4}$
,, 50- 59 ,,			1	2	$\frac{2}{3}$	1	6
,, 60- 69 ,, 70- 79 ,,		• •	2	_	3 1	$\frac{}{3}$	5 5
,, 70- 79 ,, 80- 89 ,,	• •		6	$\frac{}{2}$	4	4	16
,, 90- 99 ,,	• •	• •	4	6	12	8	30
,, 100-109 ,, ,, 110-119 ,,	• •	• •	1 4	5	3	$\begin{bmatrix} 2 \\ 8 \end{bmatrix}$	$\frac{3}{20}$
,, 110-119 ,, 120-129 ,,	• •	• •	4	$\frac{5}{2}$	_	4	
,, 130-139 ,,		• •	1	—		4	10 5 2 7 2 5
,, 140-149 ,, ,, 150-159 ,,	• •	• •	$\frac{2}{3}$	2	$\frac{}{2}$		7
,, 160-169 ,,	• •	• •		1	_	1	2
,, 170-179 ,,			2	$\frac{3}{2}$	-	_	5
,, 180-189 ,,	• •	• •		2		2	4
,, 190-199 ,, ,, 200-209 ,,	• •		$\frac{}{2}$	_	_		2
,, 210-219 ,,	• •		$\frac{2}{2}$	1	—		2 3
,, 221 ,,	• •	• •	1		_	1	1 1
,, 242 ,, ,, 244 ,,	• •		$\frac{-}{1}$				1
$\frac{1}{1}$, $\frac{1}{272}$, $\frac{1}{1}$			î			·	1
,, 285 ,,	• •	• •	—	1			1 1
,, 357 ,, ,, 433 ,,	• •	4 4		1 1			1
,, 433 ,, ,, 486 ,,	• •	• •	1			_	1 1
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	••	• •	-	1	- 1	-	1
Total			41	*33	28	39	141

^{*} One European female not yet discharged.

AFTER HISTORY OF CASES ADMITTED TO NELSPOORT SANATORIUM.

AFTER HISTORY OF CASES ADMITTED TO						1	OIVI N.	111111	1010111	
	Euro	pean.	Non-E	uropean.		Euro	pean.	Non-E	uropean.	
	Male.	Female.	Male.	Female.	Total.				Female.	Total.
New Cases Admitted	(1) Co	ndition			d in	(2) Co	ndition	in Nov	ember.	1935.
5th May, 1924 to 30th June, 1926.		th	ese col	umns.						
Still in the Sanatorium	1	3	1		5	_			_	
Died in the Sanatorium Re - admitted to the	4	2	_	1	7	6	2	_	1	9
Sanatorium (1) before										
or (2) after 30th June, 1935	6	3	1	2	12	_				
Improved	42	51	$\frac{21}{4}$	26	140	6	7	3	2	18
Not improved or worse Died since discharge	7 13	$\frac{16}{4}$	11	8 8	35 36	$egin{array}{c} 2 \\ 42 \end{array}$	38	32	$\frac{}{28}$	$\begin{vmatrix} 2 \\ 140 \end{vmatrix}$
Removed and lost sight of	9	13	4	6	32	26	45	7	20	98
Total	82	92	42	51	267	82	92	42	51	267
New Cases Admitted										
July, 1926 to June,	(1) Co	ndition	in Aug	ust, 192	7.	(2) Co	ndition	in Nov	ember,	1935.
1927. Still in the Sanatorium	2	2	4	2	10	_				
Died in the Sanatorium Re - admitted to the	1	1	2		4	1	1	2		4
Sanatorium after 30th										
June, 1927 (1) or 30th June, 1935 (2)		1			1					
Improved	18	18	6	10	52	2	5	3	3	 13
Not improved or worse Died since discharge	1 5	6 2	5	8 1	20 8	1 11	9	<u>-</u>	$\frac{}{12}$	1 40
Removed and lost sight of	7	5	1	1	14	19	20	5	7	51
Total	34	35	18	22	109	34	35	18	22	109
New Cases Admitted										
July, 1927 to June, 1928.	(1) Co	ndition	in Aug	ust, 192	8.	(2) Co	ndition	in No v	ember,	1935.
Still in the Sanatorium	5	7	6	3	21	_	_	_	_	_
Died in the Sanatorium Re - admitted to the	1		_	_	1	1	—	_	1	2
Sanatorium after 30th June, 1928 (1) or 30th										
June, 1935 (2)	_	_	_		_	_		_		_
Improved	17	$\begin{array}{c c} 15 \\ 2 \end{array}$	9	8	49	2	3	4 2	2	11 2
Died since discharge	2	ĩ	1		4	11	$\overline{12}$	11	5	39
Removed or lost sight of	5	3	2	1	11	17	13	1	4	35
Total	31	28	18	12	89	31	28	18	12	89
New Cases Admitted										
July, 1928 to June, 1929.		ndition	in Nov	ember,	1929.	(2) Co	ndition	in Nov	ember,	1935.
Still in the Sanatorium Died in the Sanatorium	2	5	-	1	8	_	_	_	- 1	-
Re - admitted to the					_				_	
Sanatorium after 30th June, 1929 (1) or 30th										
June, 1935 (2)	33	$\frac{-}{16}$	14		70		_	_	_	-
Not improved or worse	2	6	3	13	76 14	$\begin{bmatrix} 5 \\ 2 \end{bmatrix}$	$\frac{2}{1}$	2	2	11 3
Died since discharge Removed or lost sight	3	3	1	-	7	19	11	10	6	46
of	9	4			13	23	20	6	9	58
Total	49	34	18	17	118	49	34	18	17	118
New Cases Admitted July, 1929 to June,	(1) (2)	ndition	in N	1	1000	(8) (7	7:41	3.7		
1930.	(1) 001	ndition	11 110V	moer,	1930.	(2) Co 1	ndition	n Nov	ember,	1935.
Still in the Sanatorium Died in the Sanatorium	1	$\frac{1}{1}$	$\frac{-}{1}$		1 3	$-\frac{1}{1}$	$\frac{1}{1}$	$\frac{}{1}$	-	$-\frac{1}{3}$
Re - admitted to the Sanatorium after 30th						•	1	1		3
June, 1930 (1) or 30th										
June, 1935 (2)	$\frac{}{26}$	$\frac{}{23}$	$\frac{}{21}$	1 11	1 81	$\frac{}{10}$	_		_	_
Not improved or worse	2	3	4	2	11		6	10	3	29
Died since discharge Removed and lost sight	4		1	-	5	9	9	13	6	37
of	3	- /	_	-	3	16	11	3	5	35
Total	36	28	27	14	105	36	28	27	14	105

1	1									
	Euro	pean.	Non-E	ropean.	Total.	Euro	pean.	Non-E	uropean.	Total.
	Male.	Female.	Male.	Female.	Total.	Male.	Female.	Male.	Female.	
New Cases Admitted July, 1930 to June, 1931. Still in the Sanatorium Died in the Sanatorium	(1) Co	ndition —	in Nov	ember,	1931. —	(1) Co	ndition	in Nov	ember,	1935. —
Re - admitted to the Sanatorium after 30th June, 1931 (1) or 30th June, 1935 (2) Improved		<u></u>			58	1 8				1 19
Not improved or worse Died since discharge Removed and lost sight	4	4	<u>2</u>	2	12	7	8	5	$\frac{1}{3}$	1 23
of	4	4	1	1	10	21	7	2	7	37
Total	37	19		16	81	37	19	9	16	81
New Cases Admitted July, 1931 to June, 1932.	(1) Co	ndition	in Nov	ember,	1932.	(2) Co	ndition	in Nov	emb er,	1935.
Still in the Sanatorium Died in the Sanatorium Re - admitted to the Sanatorium after 30th June, 1932 (1) or 30th	_	_	2	_	2	_				2
June, 1935 (2)	20	22	25	${20}$	87	$-\frac{7}{2}$	11	11	7	36
Not improved or worse Died since discharge	3 —	4	5 2	4 1	$\frac{16}{3}$	2 5	8	$\frac{1}{13}$	8	7 34
Removed and lost sight of	1	1	_		2	10	8	7	6	31
Total	24	27	34	25	110	24	27	34	25	110
New Cases Admitted July, 1932 to June, 1933.	(1) Co	ndition	in Nov	ember,	1933.	(2) Co	ndition	in Nov	embe r ,	19 3 5.
Still in the Sanatorium Died in the Sanatorium Re - admitted to the Sanatorium after 30th June, 1933 (1) or 30th		1	2		3	=	1		_	3
June, 1935 (2)	33 6 —	$\frac{-}{21}$ $\frac{5}{1}$	15 6 4	$\frac{}{28}$ $\frac{}{3}$ 1	$\begin{array}{c} - \\ 97 \\ 20 \\ 6 \end{array}$	$egin{array}{c} 1 \\ 20 \\ 4 \\ 7 \end{array}$	$\begin{bmatrix} 1\\12\\2\\6 \end{bmatrix}$	1 7 5 9	18 7 5	3 57 18 27
Removed and lost sight of	5	4	3	2	14	12	10	6	5	3 3
Total	44	32	30	35	141	44	32	30	35	141
New Cases Admitted July, 1933, to June,	(1) Co	ndition	in Nov	ember,	1934.	(2) Co	ndition	in Nov	emb er,	1935.
1934. Still in the Sanatorium Died in the Sanatorium Re - admitted to the Sanatorium after 30th June, 1934 (1) or	1	1	1	1	2 3	_	1	1	1	3
30th June, 1935 (2) Improved	$\frac{}{16}$		$\frac{}{13}$	- 14	$\frac{-}{61}$	10	$\begin{array}{c} 1 \\ 14 \end{array}$		8	1 46
Not improved or worse Died since discharge	$\begin{bmatrix} 8 \\ 2 \end{bmatrix}$	4	4 4	6	$\frac{22}{6}$	5 7	5	2 5	6 5	18 18
Removed and lost sight of	4	4	4		12	9	6	4	1	20
Total	31	28	26	21	106	31	28	26	21	106
New Cases Admitted July, 1934 to June,				mber, 1						
1935. Still in the Sanatorium Died in the Sanatorium Re - admitted to the Sanatorium after 30th	4	4		1	9 2				ı	
June, 1935	$\frac{}{22}$	$\frac{}{15}$	$\frac{-}{15}$	$\frac{}{23}$	$\frac{-}{75}$					
Not improved or worse Died since discharge	$\begin{bmatrix} -1 \\ 3 \\ 1 \end{bmatrix}$	$\frac{3}{2}$	$\frac{2}{2}$	4 6	12 11					
Removed and lost sight of	6	2	3	3	14					
Total	36	26	24	37	123					

DUINENDAL TUBERCULOSIS SETTLEMENT.

The Capetown cases (European males) treated at Duinendal (see page 16), during the year ended 30th June, 1935, were as follows:—

In residence at beginning of year	12
	19
Discharged during year	20
In residence at end of year	11

CARE COMMITTEE FOR TUBERCULOUS PATIENTS.

The voluntary care committee works in close co-operation with the City Health Department. Office accommodation is provided in the department, and the salary of the almoner employed by the Committee is paid by the City Council. The rest of the funds are obtained chiefly through the Community Chest.

The work done is indicated by the following statistics:—

	Year ended 31st March, 1935.	Year ended 31st March, 1936.
Monthly rent payments	217	242
Monthly maintenance grants	39	22
Monthly payments to foster mothers	30	30
Cases (or families) supplied with clothing	362	2,000* approx.
Cases (or families) supplied with blankets	84	138†
Almoner:		
Visits paid	1,261	1,350
Interviews given	1,392	1,555
New cases handled:		
European	38	40
Non-European	166	147
* Garments distributed. † Bland	kets distribute	ed.

The Duinendal Tuberculosis Settlement (see above) is also maintained by the Care Committee.

Amongst the chief factors in the causation of tuberculosis are bad nutrition, bad housing and overcrowding, bad industrial conditions, and alcoholism and other vices; and while good results may be expected from the treatment and isolation of patients it cannot be too strongly emphasized that the most promising line of attack on tuberculosis is in the direction of the improvement of housing and of social and economic conditions generally.

ENTERIC OR TYPHOID FEVER.

The cases of this disease reported in the year 1934-35, corrected for imported cases and misdiagnosis, numbered 82 (33 European and 49 non-European). This is equivalent to an incidence rate of 0.28 per 1,000 population (0.22 European and 0.35 non-European).

The original number of notifications was 136, of which 12 were imported cases. 47 of the 124 were afterwards found in the City Hospital not to be suffering from enteric fever (and also 3 of the 12). 5 patients admitted to the City Hospital for other diseases proved to be cases of enteric fever.

In addition to the cases enumerated above there were 42 patients admitted to the City Hospital from outside the Municipality and from ships in Capetown Harbour diagnosed as suffering from enteric fever. After correction for errors of diagnosis the number of such cases was 27.

The number of deaths amongst the 82 Capetown cases was 12 (5 European and 7 non-European), giving a case mortality rate of 14.6 per cent. (15.2 per cent. European and 14.3 per cent. non-European).

The total Capetown deaths from enteric fever registered during the year numbered 15 (6 European and 9 non-European), equivalent to a death rate of 0.05 per 1,000 population (0.04 European and 0.06 non-European).

From this disease there were also one case (native, non-fatal) at N'dabeni location, and 5 cases (natives, 1 fatal) at the Langa location. One of the cases at Langa was an imported case. These are excluded from the above figures.

In the following table are set out the number of enteric cases and deaths together with the corresponding rates for a series of years:—

		Cas	es.			Deaths.			
Year.	Eur	European.		Suropean.	European.		Non-European.		
	Number	Rate per 1,000 population.	Number	Rate per 1,000 population.	Num- ber.	Rate per 1,000 population.	Num- ber.	Rate per 1,000 population.	
Municip	a lity exc	luding W	ynberg	Ward:				,	
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	250 163 163 138 204 251 345 204 180 121 79 87 117	$3 \cdot 13$ $1 \cdot 96$ $1 \cdot 90$ $1 \cdot 55$ $2 \cdot 20$ $2 \cdot 60$ $3 \cdot 46$ $1 \cdot 98$ $1 \cdot 71$ $1 \cdot 12$ $0 \cdot 72$ $0 \cdot 78$ $1 \cdot 02$	218 133 149 124 191 202 308 207 141 93 94 100 123	$2 \cdot 89$ $1 \cdot 73$ $1 \cdot 92$ $1 \cdot 58$ $2 \cdot 40$ $2 \cdot 50$ $3 \cdot 78$ $2 \cdot 48$ $1 \cdot 64$ $1 \cdot 04$ $1 \cdot 02$ $1 \cdot 05$ $1 \cdot 25$	21 8 14 12 18 21 37 21 22 12 8 8 15	0.26 0.01 0.16 0.13 0.19 0.22 0.37 0.20 0.21 0.11 0.07 0.07 0.13	23 28 32 31 33 42 46 42 27 20 20 17 27	0.30 0.37 0.41 0.40 0.42 0.52 0.56 0.31 0.23 0.21 0.18 0.28	
		luding W		Ward:					
$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	109	0.84 0.76	135 100	$\begin{array}{c} 1 \cdot 18 \\ 0 \cdot 85 \end{array}$	10 13	0.08 0.10	$\begin{array}{c} 25 \\ 25 \end{array}$	$0 \cdot 22$ $0 \cdot 21$	
1929-30	87	0.65	94	0.77	8	0.06	17	0.14	
1930-31	97	0.71	103	0.82	8	0.06	24	0.19	
$\begin{bmatrix} 1931-32 & \dots & \dots \\ 1932-33 & \dots & \dots \end{bmatrix}$	$\begin{array}{c c} 71 \\ 30 \end{array}$	$\begin{array}{c} 0\cdot51 \\ 0\cdot21 \end{array}$	$\frac{98}{30}$	$\begin{array}{c} 0\cdot 76 \\ 0\cdot 23 \end{array}$	13 3	0.09 0.02	24 5	0.19 0.04	
1933-34	$\frac{50}{52}$	0.36	47	0.34	$\frac{3}{2}$	0.02	7	0.05	
1934-35	33	0.22	49	0.35	6	0.04	9	0.06	

There has been a striking diminution in enteric fever in recent years.

Reference to Table F, on page 132, will show the seasonal incidence of the disease. 36 cases were notified in the spring half of the year and 46 in the autumn half. The monthly number of cases notified was greatest in July, 1934 (carrying on from the previous year), and January, 1935.

11 of the cases occurred in institutions; viz., 6 in a Union Government institution in Ward 15, 1 in each of two Union Government institutions in Wards 6 and 10, 1 at the City Hospital for Infectious Diseases in Ward 2 (a maid), and 1 in each of two institutions in Wards 4 and 5. The other cases occurred in 61 houses, in 55 of which there was one case each, in 4 two cases, in 1 three cases and in 1 five cases.

The ward distribution of the cases will be found in Table G, on page 133, and the age and sex distribution in Table H, on page 134.

Of the 136 uncorrected cases 109 were admitted to the City Hospital and 11 were treated in other hospitals.

DIPHTHERIA.

The cases of this disease reported in the year 1934-35, corrected for imported cases and misdiagnosis, numbered 374 (238 European and 136 non-European). This is equivalent to an incidence rate of 1.29 per 1,000 population (1.61 European and 0.96 non-European).

The original number of notifications was 456, of which 2 were imported cases. 81 of the 454 were afterwards found in the City Hospital not to be suffering from diphtheria. One patient admitted to the City Hospital for another disease proved to be a case of diphtheria.

In addition to the cases enumerated above, there were 49 eases diagnosed as suffering from diphtheria admitted to the City Hospital from outside the Municipality. After correction for errors of diagnosis the number of such cases was 36.

The number of deaths amongst the 374 Capetown cases was 26 (10 European and 16 non-European) giving a case mortality rate of 7.0 per cent. (4.2 European and 11.8 non-European).

The total Capetown deaths from this disease registered during the year numbered 28 (9 European and 19 non-European), equivalent to a death rate of 0.10

per 1,000 population (0.06 European and 0.13 non-European).

Of this disease there were also 2 cases (non-fatal) in natives at the N'dabeni location, and 2 cases (natives, non-fatal) at Langa location. These are excluded from the above figures.

In the following table are set out the number of diphtheria cases and deaths

together with the corresponding rates for a series of years: -

		Ca	ses.			Deaths.				
Year.	Year. European.		Non-E	uropean.	Eur	opean.	Non-European.			
	Number	Rate per 1,000 population.	Number	Rate per 1,000 population.	Num- ber.	Rate per 1,000 population.	Num- ber.	Rate per 1,000 population.		
Municipa	lity exc	luding W	ynberg	Ward:						
1914-15 1915-16 1916-17 1917-18 1918-19 1919-20 1920-21 1921-22 1922-23 1923-24 1924-25 1925-26 1926-27	155 189 164 107 113 125 75 89 121 163 209 180 186	$ \begin{array}{r} 1 \cdot 94 \\ 2 \cdot 27 \\ 1 \cdot 91 \\ 1 \cdot 20 \\ 1 \cdot 22 \\ 1 \cdot 30 \\ 0 \cdot 75 \\ 0 \cdot 86 \\ 1 \cdot 15 \\ 1 \cdot 51 \\ 1 \cdot 90 \\ 1 \cdot 60 \\ 1 \cdot 62 \\ \end{array} $	62 51 41 32 25 36 25 18 24 49 41 46 87	0.82 0.67 0.53 0.41 0.31 0.45 0.29 0.22 0.28 0.55 0.45 0.48 0.89	16 17 10 7 3 8 5 8 11 9 17 8	0.20 0.20 0.12 0.08 0.03 0.08 0.05 0.08 0.10 0.08 0.115 0.07 0.10	22 19 13 11 10 12 3 6 5 11 8 11	0.29 0.25 0.17 0.14 0.13 0.15 0.04 0.07 0.06 0.12 0.09 0.12 0.16		
		luding W 1 · 25 1 · 23 1 · 23 1 · 38 0 · 86 1 · 00 1 · 33		Ward: 0.54 0.59 0.44 0.74 0.52 0.55 0.77	10 13 14 9 7 8 6	$ \begin{array}{c} 0.08 \\ 0.10 \\ 0.10 \\ 0.06 \\ 0.06 \\ 0.04 \end{array} $	12 15 11 11 11 6 11 19	$\begin{array}{c} 0.11 \\ 0.13 \\ 0.09 \\ 0.09 \\ 0.09 \\ 0.05 \\ 0.08 \\ 0.13 \end{array}$		

14 of the cases occurred in institutions; viz., 6 at the City Hospital for Infectious Diseases in Ward 2 (5 nurses and 1 maid), 2 in each of two institutions in Wards 5 and 14, and 1 in each of four institutions in Wards 2 (2), 8 and 12. The other cases occurred in 337 houses, in 316 of which there was one case each, in 19 two cases each and in 2 three cases each.

In Table F, on page 132, is shown the monthly distribution of cases through-

The ward distribution of the cases will be found in Table G, on page 133, and the age and sex distribution in Table H, on page 134.

Of the 456 uncorrected cases, 403 were admitted to the City Hospital.

Diphtheria Carriers.

In addition to the cases enumerated above, five diphtheria carriers were reported during the year. Two of these had been admitted to the City Hospital wrongly diagnosed as cases of diphtheria. The other three were reported as carriers originally: two of them were admitted as such to the City Hospital, and the other remained at home. There was one other diphtheria carrier reported in the person of a resident outside the municipal area, who had been admitted to the City Hospital wrongly diagnosed as a case of diphtheria.

SCHICK-TESTING AND ANTI-DIPHTHERIA INOCULATION.

Special sessions have been held at certain of the child welfare centres, where young children have received protective inoculations of diphtheria prophylactic

3

5

2

3

without preliminary Schick-testing. Propaganda work has been carried out by the health visitors to convince the mothers of the advisability of availing themselves of protective inoculation for their children.

Where application has been made by the principals of schools or institutions for the protective inoculation of the children, arrangements have been made to hold sessions there. In most cases Schick-testing has been carried out prior to inoculation.

The prophylactics used have been toxoid-antitoxoid, toxoid-antitoxin floccules and anatoxin. At the end of the year under report alum precipitated preparations were under trial.

The following figures indicate the work done during the year ended 30th June, 1935:—

Persons Schick-tested:

Schools		Nega- tive. 711 15 12	Not Read. 66 5 12	1,685
Total	960	738	83	1,781*

*Of these, 27 persons had been Schick-tested on previous occasions, but had not received protective inoculations.

Number of first series protective inoculations given:

inoculations given:						
	1st of series.	2nd serie		3rd of series.	4th of series.	Total injections.
Schools	1,484	1,4'	77	1,366		4,327
Institutions	60	· ·	35	30		125
Child Welfare Centres	1,128	9	52 — –	735	2	2,817
$egin{array}{cccccccccccccccccccccccccccccccccccc$	2,672	2,40	64	2,131	2	7,269
Persons Schick-tested after a first ser protective inoculations:	ries of					
			Posi- tive.	Nega- tive.	Not read.	Total.
Schools			39	111	2	152
Institutions Child Welfare Centres			15	• 46	11	72
Total			54	157	13	224
Number of second series protective inoculations given:						
		1st of series.	2nd of series.		4th of series.	Tota- injec. tionsl
Schools		48	35	31		114
Institutions		5	7	8		20
Child Welfare Centres		31	27	21		79
Total ···		84	69	60		213
Persons Schick-tested after a second of protective inoculations:	d seri	es				
			Posi-	Nega- tive.	Not read.	Total.
Schools			2			~

Institutions

Child Welfare Centres

Total

Number of third series protective inoculations given:

	1st of series.	2nd of series.	3rd of series.	4th of series.	Total injections.
Schools	3	3	3		9
Institutions	1	1	1		3
Child Welfare Centres	1	1	2		4
Total	5	5	6		16

SCARLET FEVER.

The cases of this disease reported in the year 1934-35, corrected for imported cases and misdiagnosis, numbered 243 (229 European and 14 non-European). This is equivalent to a incidence rate of 0.84 per 1,000 population (1.55 European and 0.10 non-European).

The original number of notifications was 254, of which 2 were imported cases. 12 of the 252 were afterwards found in the City Hospital not to be suffering from scarlet fever. 3 patients admitted to the City Hospital for another disease proved to be cases of scarlet fever.

In addition to the cases enumerated above there were 3 cases diagnosed as suffering from scarlet fever admitted to the City Hospital from outside the Municipality, 2 of which were afterwards found not to be suffering from scarlet fever.

There were 2 deaths (European females) amongst the 243 Capetown cases and 1 death (European) from this disease registered during the year.

There were 2 cases of this disease (native, non-fatal) at the Langa native

location.

In the following table are set out the number of scarlatinal cases and deaths together with the corresponding rates, for a series of years:

	Cases.				Deaths.			
Year.	European.		Non-European.		European.		Non-European.	
	Number	Rate per 1,000 population.	Number	Rate per 1,000 population.	Num- ber.	Rate per 1,000 population.	Num- ber.	Rate per- 1,000 po- pulation.
3034 35	pality exc	$\frac{1}{0.98}$	$\frac{10}{10}$	Ward: 0·13	2	0.03		
1018 10	128	1.54	8	0.10	_	_		
1915–16	52	0.60	4	0.05	_	_		
1917–18	97	1.09	13	0.17			_	
1918–19	153	$1 \cdot 65$	18	0.23		_		
1919–20	274	2.84	23	$0 \cdot 29$	3	0.03		_
1920–21	224	$2 \cdot 25$	15	0.18	2	$0 \cdot 02$		
1921–22	97	0.94	9	0.11			—	_
1922–23	47	0.45	5	0.06	_			_
1923–24	26	0.24	3	0.03		_		i —
1924–25	50	0.46	1	0.01		_		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
1925–26	129	$1 \cdot 15$	8	0.08	_	_	1	$0 \cdot 01$
1926–27	123	$1 \cdot 07$	- 11	0.11	_			_
Munici pality including Wynberg Ward:								
300-00	228	1.76	ynberg 6	$\begin{array}{c} \operatorname{Ward}: \\ 0 \cdot 05 \end{array}$	3	$0 \cdot 02$		_
1000 00	154	$1 \cdot 76$ $1 \cdot 17$	10	0.08	_		1	0.01
1000 00	260	1.93	20	0.16	2	0.01	î	0.01
1929–30	425	3.11	40	0.32	ī	0.01		
1931-32	121	0.87	18	0.14	_	_		_
1932-33	121	0.85	19	0.14	_	_		_
1933–34	103	0.71	9	0.07	_		_	_
1934-35	229	1.55	14	0.10	1	0.01		

12 of the cases occurred in institutions; viz., 2 in a Union Government institution in Ward 11, 1 at the City Hospital for Infectious Diseases in Ward 2 (a nurse), 4 in an institution in Ward $\bar{2}$, 3 in an institution in Ward 4, and 1 in each of two institutions in Wards 5 and 15. The other cases occurred in 201 houses, in 174 of which there was one case each, in 24 two cases each, and in 3 three cases each.

It will be seen from Table F, on page 132, which shows the monthly distribution of the cases, that in April, May and June. 1935, there was an increase in the incidence of the disease. This was continued into the opening months of the following year (1935-36).

The ward distribution and the age and sex distribution are shown in Tables G and H on pages 133 and 134.

Of the 254 uncorrected cases, 146 were admitted to the City Hospital, Portswood Road, and 4 to Rentzkie's Farm Hospital.

ERYSIPELAS.

The cases of this disease reported in the year 1934-35, corrected for imported cases and misdiagnosis, numbered 94 (44 European and 50 non-European).

The original number of notifications was 99, of which one was an imported case. Four of the 98 were afterwards found in the City Hospital not to be suffering from erysipelas (and also the one imported case).

There were also 5 eases diagnosed as suffering from erysipelas admitted to the City Hospital from outside the Municipality and from ships in Capetown Harbour. Of these, one was afterwards found not to be suffering from erysipelas.

There were 6 deaths (4 European and 2 non-European) from erysipelas during the year.

The cases each occurred in separate houses.

Of the 99 uncorrected cases, 34 were admitted to the City Hospital and 5 were treated in other hospitals.

CEREBROSPINAL FEVER.

The cases of this disease reported in the year 1934-35, corrected for imported cases and misdiagnosis, numbered 25 (5 European and 20 non-European). This is equivalent to an incidence rate of 0.09 per 1,000 population (0.03 European and 0.14 non-European).

The original number of notifications was 75, of which one was an imported ease. 51 of the 74 were afterwards found in the City Hospital not to be suffering from cerebrospinal fever (and also the one imported case). 2 Capetown patients admitted to the City Hospital for other diseases proved to be cases of cerebrospinal fever.

In addition to the cases enumerated above, there were 17 patients admitted to the City Hospital from outside the Municipality, diagnosed as suffering from cerebrospinal fever, 15 of which were afterwards found not to be suffering from this disease.

The number of deaths amongst the 25 Capetown cases was 19 (4 European and 15 non-European), giving a case mortality rate of 76.0 per cent. (80.0 European and 75.0 non-European). The corresponding percentages for 1933-34 were 90.0, 100.0 and 88.2.

The total Capetown deaths from the disease registered during the year numbered 18 (3 European and 15 non-European), equivalent to a death rate of 0.06 per 1,000 population (0.02 European and 0.11 non-European).

In the following table the number of cases of cerebrospinal fever notified and from the disease are shown for each year since it was made notifiable:

Year.		Cases n	otified.	Deaths.		
		European.	Non-European.	European.	Non-European.	
1915-16 1916-17 1917-18 1918-19 1919-20 1920-21 1921-22 1922-23 1922-23 1923-24 1924-25 1925-26 1926-27			Municipality 2 2 6 3 3 4 4 4 4 10	excluding Wy 2 5 6 1 1 5 3 19 21 39	nberg Ward:	2 5 5 1 2 3 11 19 29
1927-28 1928-29 1929-30 1930-31 1931-32 1932-33 1933-34 1934-35	• • • • • • • • • • • • • • • • • • • •		Municipality 39 30 14 4 7 8 3 5	including Wy 183 101 48 18 35 22 17 20	7 nberg Ward: 18 16 8 3 3 5 3 3	92 59 27 15 21 15 17

The cases occurred in 24 houses, in 23 of which there was one case each and in one 2 cases. The history of the latter was as follows: In a European family consisting of parents and four children, with two single lodgers, living in a house of seven rooms and kitchen, etc., a boy aged 3 years fell ill on 8th August, 1934, and the next day was sent as a case of cerbrospinal fever into the City Hospital, where he died on 12th August. His brother, a baby aged six months, became ill on 20th August, and on 28th August was admitted as a case of the same disease to the City Hospital, where he died on 4th September.

The monthly, ward, age and sex distribution of the cases is shown in Tables F, G and H, on pages 132, 133, and 134.

Of the 75 uncorrected cases, 61 were admitted to the City Hospital.

INFECTIVE ENCEPHALITIS.

The cases of this disease reported in the year 1934-35, corrected for imported cases and misdiagnosis, numbered 11 (8 European and 3 non-European).

The original number of notifications was 18. 8 of the 18 were found, after admission to the City Hospital, not to be suffering from infective encephalitis. One patient admitted to the City Hospital for another disease proved to be a case of infective encephalitis.

In addition to the cases enumerated above there were 2 patients admitted to the City Hospital from outside the Municipality diagnosed as suffering from infective encephalitis, one of which was afterwards found not to be suffering from this disease.

There were 5 deaths amongst the Capetown cases (3 European and 2 non-European) and 3 deaths (2 European and 1 non-European) registered during the year.

In the following table the number of cases of infective encephalitis notified and of deaths from the disease are shown for each year since it was made notifiable:—

Year.	Cases n	otified.	Deaths.		
rear.	European.	Non-European.	European.	Non-European.	
1920-21 1921-22 1922-23 1923-24 1924-25 1925-26 1926-27 1927-28 1928-29 1929-30 1930-31 1931-32 1932-33 1933-34 1934-35	Muncipality 3 5 3 5 6 6 6 Muncipality 8 7 4 1 7 4 2 8	excluding Wynb 1 1 4 5 10 5 including Wynb 3 5 3 4 2 4 3	2 5 2 3 3 6 4	$ \begin{array}{c} 1 \\ -1 \\ 4 \\ 4 \\ 7 \\ 5 \\ 3 \\ 3 \\ -1 \\ -1 \\ 1 \end{array} $	

The cases in 1934-35 each occurred in a different house, there being no secondary cases.

The monthly, ward, and age and sex distribution of the cases will be found in Tables F, G and H, on pages 132, 133 and 134.

Of the 18 uncorrected cases, 9 were treated at the City Hospital, 6 in other hospitals and 3 at home.

ACUTE POLIOMYELITIS.

The cases of this disease reported in the year 1934-35, corrected for imported cases and misdiagnosis, numbered 25 (11 European and 14 non-European). In two of these, a European female, aged 18 years, and a non-European male aged $1\frac{1}{6}$ years, the disease took the form of polio-encephalitis.

The original number of notifications was 27, one of which was an imported case. Two of the 26 were afterwards found in the City Hospital not to be suffering from acute poliomyelitis. One case admitted to the City Hospital as suffering from another disease proved to be a case of poliomyelitis.

In addition to the cases enumerated above there were 2 cases admitted to the City Hospital from outside the Municipality, one of which admitted for another disease was alfterwards found

to be a case of polio-encephalitis.

The number of deaths amongst the 25 Capetown cases was 4 (1 European and 3 non-European). The total Capetown deaths registered from this disease during the year numbered 4 (1 European and 3 non-European). One of these (European female) died of polio-encephalitis.

Of this disease there were also 3 cases (non-fatal) in natives of the locations (1 at N'dabeni and 2 at Langa). These are excluded from the above figures.

In the following table the number of cases notified and of deaths from the disease are shown for each year since it was made notifiable:—

Year.	Cases	notified.	Deat	hs.
Year.	European.	Non-European.	European.	Non-European.
1915-16	Municipality 4 3 3 2 1 3 1 - 1 1 - 2 Municipality 8 4 11 5 - 4 8 11	excluding Wyn 5 1 2 2 1 1 1 1 1 1 - 1 - including Wyn 4 1 6 5 - 4 3 14	Not separatel	y classified. 2 1 1 1 1 1 2 2

The cases occurred in 24 houses, in 23 of which there was one case each and in 1 two cases. The history of the latter was as follows: A European girl, aged 5 years, fell sick on 24th October, 1934, with an illness which proved to be acute anterior poliomyelitis, and was notified as such on 31st October, on which date the patient was removed to the City Hospital. At the same time a twin brother was notified by the same doctor as suffering from the same disease: he had fallen ill on 16th October and in notifying the case the doctor reported that his symptoms had been meningeal only and that he had fully recovered.

The monthly, ward, and age and sex distribution of the cases will be found in Tables F, G and H, on pages 132, 133 and 134.

Of the 27 uncorrected cases 10 were treated at the City Hospital and 5 in other hospitals.

INFLUENZA AND PNEUMONIA.

In the year 1934-35 the corrected number of notified cases of pneumonia was as follows:—

Influenzal pneumonia	127
Acute primary pneumonia	704

Reference to Table I, on page 135, will show that the number of cases of acute primary pneumonia notified was much greater than in any previous year both for Europeans and non-Europeans. The notifications of influenzal pneumonia were also relatively numerous, but not to the same extent. The part played by these conditions in increasing the death rate for the year is referred to elsewhere in this report.

A more reliable index to these conditions is to be found in the death returns. In the following table is set out for each year from the great epidemic onwards the number of deaths (corrected for outward transfers) certified as due to influenza and also bronchitis and pneumonia, which increase in the presence of influenzal infection, together with the corresponding death rate per 1,000 population (deaths in the native locations of Langa and N'dabeni excluded).

and an analysis desired response upon the control of the control o	Andrew Control of the	Influ	enza.		THE RESERVE OF THE PARTY.	Brono	chitis.		Pneumonia.					
Year.	Euro	Nor European. Europ			Euro	pean.	No Euro	on- pean.	Euro	pean.	Non- European.			
	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.		
1918-1919	864 2 1 5 6 3 25 13 13 20 23 32	$\begin{array}{c} 9 \cdot 33 \\ 0 \cdot 02 \\ 0 \cdot 01 \\ 0 \cdot 05 \\ 0 \cdot 06 \\ 0 \cdot 03 \\ 0 \cdot 22 \\ 0 \cdot 12 \\ 0 \cdot 11 \\ 0 \cdot 16 \\ 0 \cdot 18 \\ 0 \cdot 24 \end{array}$	2,893 5 18 10 5 3 30 22 13 52 33 29	$\begin{matrix} 36 \cdot 41 \\ 0 \cdot 06 \\ 0 \cdot 22 \\ 0 \cdot 12 \\ 0 \cdot 06 \\ 0 \cdot 03 \\ 0 \cdot 32 \\ 0 \cdot 23 \\ 0 \cdot 18 \\ 0 \cdot 46 \\ 0 \cdot 28 \\ 0 \cdot 24 \end{matrix}$	47 39 42 43 39 32 29 26 40 39 40 36	$\begin{array}{c} 0.51 \\ 0.40 \\ 0.42 \\ 0.42 \\ 0.37 \\ 0.30 \\ 0.26 \\ 0.23 \\ 0.35 \\ 0.30 \\ 0.31 \\ 0.27 \end{array}$	216 203 237 197 222 185 148 213 255 305 217 221	$ \begin{array}{c} 2 \cdot 72 \\ 2 \cdot 52 \\ 2 \cdot 91 \\ 2 \cdot 36 \\ 2 \cdot 58 \\ 2 \cdot 07 \\ 1 \cdot 59 \\ 2 \cdot 25 \\ 2 \cdot 61 \\ 2 \cdot 67 \\ 1 \cdot 84 \\ 1 \cdot 82 \end{array} $	239 71 89 112 91 92 58 70 84 96 93 65	2 · 58 0 · 74 0 · 89 1 · 09 0 · 86 0 · 85 0 · 52 0 · 63 0 · 74 0 · 75 0 · 71 0 · 49	229 385 418 379 407 445 323 269 387 509 390 338	$\begin{array}{c} 2.88 \\ 4.77 \\ 5.13 \\ 4.54 \\ 4.72 \\ 4.98 \\ 3.46 \\ 2.84 \\ 3.96 \\ 4.46 \\ 3.31 \\ 2.78 \end{array}$		
1930-1931* 1931-1932*	9 30	$0.06 \\ 0.22$	26 43	0.20	46 35	0.33	201 218	1 ·58 1 ·69	58 100	$0.42 \ 0.72$	345 403	$\begin{array}{c} 2 \cdot 71 \\ 3 \cdot 13 \\ \end{array}$		
1932–1933* 1933–1934* 1934–1935*	12 8 30	$\begin{array}{c} 0.08 \\ 0.06 \\ 0.20 \end{array}$	$\begin{array}{c} 18 \\ 9 \\ 27 \end{array}$	$ \begin{vmatrix} 0 \cdot 14 \\ 0 \cdot 07 \\ 0 \cdot 19 \end{vmatrix} $	$\begin{array}{c} 20 \\ 30 \\ 29 \end{array}$	$ \begin{array}{c c} 0 \cdot 14 \\ 0 \cdot 21 \\ 0 \cdot 20 \end{array} $	$157 \\ 170 \\ 278$	$egin{array}{ccc} 1 \cdot 18 \\ 1 \cdot 24 \\ 1 \cdot 97 \end{array}$	$\begin{array}{c} 71 \\ 61 \\ 114 \end{array}$	$\begin{bmatrix} 0.50 \\ 0.42 \\ 0.77 \end{bmatrix}$	$ \begin{array}{r} 385 \\ 346 \\ 482 \end{array} $	$ \begin{array}{r} 2 \cdot 90 \\ 2 \cdot 53 \\ 3 \cdot 41 \end{array} $		

^{*} Corrected for European inward transfers. City extended in 1927-1928 by incorporation of Wynberg Municipality.

Other statistical details will be found in Tables A, F, G, H and I, on pages 109, 132, 133, 134 and 135.

From the municipal area, 10 cases of influenzal pneumonia (7 European and 3 non-European), and 10 cases of acute primary pneumonia (4 European and 6 non-European) were treated in the City Hospital during the year. Two cases of acute primary pneumonia (Europeans) were also admitted from outside the Municipality.

There were 7 cases of acute primary pneumonia notified from the native locations, 5 from Langa and 2 from N'dabeni, and 2 cases of influenzal pneumonia, 1 from Langa and 1 from N'dabeni.

There were 17 registered deaths from pneumonia in natives resident at Langa and N'dabeni (influenzal pneumonia nil, broncho-pneumonia 7, lobar pneumonia 5, undefined 5).

PUERPERAL FEVER.

The cases of this disease reported in the year 1934-35, corrected for imported cases and misdiagnosis, numbered 91 (24 European and 67 non-European).

The original number of notifications was 96, of which 1 was an imported case. 4 of the 95 cases were afterwards found in the City Hospital not to be suffering from puerperal fever.

In addition to the cases enumerated above there were 17 cases of puerperal fever admitted to the City Hospital from outside the Municipality.

The number of deaths amongst the 91 Capetown cases was 21 (6 of the 24 European cases and 15 of the 67 non-European). The total Capetown deaths from the disease registered during the year numbered 16 (4 European and 12 non-European).

The mortality from this cause for a series of years, expressed as a rate per 1,000 live births, is shown on page 33.

Attendance at confinement.—76 of the cases were confined at home and 15 in hospital. Of the 76 at home, 38 were attended in labour by midwives only, 6 by doctors only, and 11 by doctors and midwives; 21 were unattended.

Condition of child.—41 of the cases supervened upon the birth of a living child and 35 of a dead foetus. Of the 35 cases following delivery of a dead foetus, 7 were of a dead viable foetus, and 28 of a non-viable foetus.

Primiparae.—27 of the cases were reported as primiparae (i.e. women in their first confinement) and 61 as multiparae. In 3 cases there was no information on this point.

Treatment.—55 of the cases (corrected for misdiagnosis and imported cases) were treated in the City Hospital, 5 in the Peninsula Maternity Hospital, 1 in the Gardens Nursing Home, 1 in the Monte Rosa Nursing Home and 2 in the Woodstock Hospital; the remaining 27 were treated at home.

There was also one case of this disease (native) in the Langa location.

OPHTHALMIA NEONATORUM AND GONORRHŒAL OPHTHALMIA.

For the purpose of notification ophthalmia neonatorum is taken to mean a purulent inflammation of the eyes of an infant beginning within twenty-one days after birth, whether it is due to infection with gonococcus or not. Cases of inflammation of the eyes beginning after the twenty-first day of life are not regarded as ophthalmia neonatorum, but if due to gonococcal infection are notifiable gonorrheal ophthalmia.

The number of cases of these diseases reported in the year 1934-35, corrected for imported cases and misdiagnosis was 297 (38 European and 259 non-European).

The original number of notifications was 298, of which 2 were imported cases. One ease admitted to the City Hospital for another disease proved also to be a case of gonorrhoeal ophthalmia. In addition there were 18 cases of the disease notified as having been admitted to the Somerset Hospital from outside the Municipality.

The number of Capetown cases of true ophthalmia neonatorum notified during the year was therefore 240, comprising 30 Europeans (19 males and 11 females) and 210 non-Europeans (98 males and 112 females).

Of these 240 cases, 26 were born in institutions and 212 at home, there being no information on the point in two cases. Of the 212 home confinements, 15 were recorded as having been attended by doctors, 191 by midwives only, and 6 were unattended.

The reason why ophthalmia neonatorum is a notifiable disease is that the Medical Officer of Health may ensure so far as possible that the cases shall receive efficient treatment. The disease is recognized as being an important cause of blindness or injury to sight if treatment is not undertaken, while on the other hand the cases respond well to efficient treatment. Every case has therefore been visited by the health visitor at the earliest possible moment after being reported, and many have been seen by the lady medical officer. In-patient treatment has been supplied by the Somerset Hospital and efforts have been made to ensure that the patient should be admitted to hospital in every case where it has been advisable. In 49 cases in-patient treatment has been secured, 48 at the Somerset Hospital and 1 at the Peninsula Maternity Hospital. In the other 191 cases, 24 patients received out-patient treatment (11 at the Somerset Hospital and 13 at the Free Dispensary), and 167 were treated at home. Of the 167 cases treated at home, 132 were attended to by nurses from the Cape Hospital Board District Nursing Organisation.

Efforts were made to see all children after the completion of the treatment and the results were as follows:—

Eyes completely recovered	223
Cases of blindness	
Sight damaged	1
Died before recovery	5
Lost trace of	11
	240

It is to be recorded that the health visitors reported 81 of the cases as "slight," and 154 as "moderate" or "grave"; whilst there was no information on this point in 5 cases.

In addition to the above figures there were 2 native male cases of ophthalmia at the Langa location (aged at the time of onset 10 days, and less than one month, respectively) and 2 native female cases at the N'dabeni location (aged at the time of onset 3 days, and 26 days, respectively).

TYPHUS FEVER.

There were no cases of this disease reported in the Municipality in the year 1934-35 except for 2 cases in natives resident at Langa location.

Two young children were notified as cases of typhus fever, but after admission to the City Hospital they were found to be suffering from syphilis and not typhus fever.

Both the native cases were of the epidemic typhus type. The particulars were as follows:—

Native male, aged 46. Langa location. Employed as a builder's labourer. Fell ill about 11th October, 1934, admitted to Langa Hospital 15th October, died 16th October. Weil-Felix 1 in 20+++, 1 in 100+. Had lived at Langa for several months; no information showing source of infection.

Native male, aged 40. Langa location. Employed as builder's labourer. Fell ill about 14th October, 1934, admitted to Langa Hospital 24th October, discharged 19th November. Weil-Felix on 25th October 1 in 50 + + + 1, 1 in 100 + + 1, 2 in 100 + + 1, 2 in 100 + + 1, 3 in 100 + + 1, 2 in 100 + + 1, 3 in 100 + + 1, 3 in 100 + + 1, 2 in 100 + + 1, 3 in 100 + 1, 4 in 100 + 1, 5 in 100 + 1, 5 in 100 + 1, 6 in 100 + 1, 8 in 100 + 1, 8 in 100 + 1, 9 in 100 + 1, 8 in 100 + 1, 8 in 100 + 1, 9 in 100 + 1

The Weil-Felix tests referred to above were performed in the Government Health Laboratory, Capetown (Dr. W. F. Rhodes) with Proteus X19.

Both these natives lived in the bachelors' dormitories. Following upon the outbreak all the bedding in these dormitories and the clothing of the occupants were subjected to steam disinfection, and the buildings thoroughly deverminized. The occupants were also treated by rubbing into the skin and hair of the whole body paraffin emulsion or naphthalene oil. 1,268 natives in all were treated in this manner. Naphthalene oil was also issued for private use by the natives. There were no further cases.

MALTA FEVER.

No case of Malta Fever was notified during the year, but a diagnosis of this disease was recorded in respect of a European male adult, aged 23 years, resident in Ward 6, who was admitted to the City Hospital under the diagnosis of enteric fever, which proved to be erroneous.

An agglutination reaction was obtained against B. melitensis 1 in 20+, 1 in 100+++, and 1 in 500++. The patient suffered from pyrexia of otherwise unexplained origin.

TRACHOMA.

15 Capetown cases of this disease were notified during the year, in addition to 11 cases who were admitted to the Somerset Hospital from outside of the Municipality. The following particulars refer to the 15 Capetown cases.

14 cases were in coloured people and one in a European.

10 cases were in adults, the remainder being aged 16, 10, 9, 3 and 1 years.

The duration of the disease was said to be long in 7 cases (35, 18, 16, 12, 8 and 3 years, and 1 indefinite) and short in 7 cases (one of "several weeks," 4 of one month, 1 of six weeks and 1 of vague short duration). No information as to duration was available in one case. In certain instances, although a history of short duration was given, the doctor in charge of the case was of opinion that the disease was of long standing. At the time of onset of the disease 10 cases were said to have been living in Capetown and 2 in other parts of the country. Information on these lines was not available in 3 cases.

3 cases were notified simultaneously from one family, the first case (C.F. 27) giving a history of three years' duration, and the other two (C.M. 3 and C.F. 1), one month each. In another family two cases were notified (C.F. 10 and C.M. 9), both giving a history of one month's duration.

The cases were resident in Wards 1, 2 (4 cases in two houses), 6 (3 cases), '8, 9, 11 (4 cases in three houses) and 13.

One case was notified by a medical officer of the City Health Department and the remainder by hospital doctors. Four cases were treated in the Somerset Hospital as in-patients, and all the rest as out-patients at the Somerset Hospital or Capetown Free Dispensary.

LEPROSY.

Two cases of this disease were notified during the year, and one other resident in N'dabeni location:—

Coloured female, aged 20, Ward 14. Symptoms said to have begun nine months previously. Nasal smears positive.

Coloured female, aged 15. Ward 11. Symptoms said to have begun eight months previously. Nasal and nodular smears positive.

Native male, aged 21, N'dabeni Location. The home address was not traced. Patient came from Butterworth. Nasal smear negative.

All the patients were removed to Capetown Infirmary and thence transferred to Pretoria Leper Institution.

ANTHRAX.

There were no cases of this disease reported in the Municipality in the year 1934-35, but one case was admitted to the City Hospital from a farm at Berg River.

LEAD POISONING.

One case of chronic lead poisoning was reported (by a private practitioner) during the year in the person of a European male, aged 52, living in Ward 9. The patient was examined by a medical officer of the City Health Department, who regarded the diagnosis as doubtful. The patient was a painter, and stated that he had been suffering from symptoms for two years. In the house where he had lived for the past five months all the water service pipes were of galvanized iron.

One other case of chronic lead poisoning was admitted to the Somerset Hospital from Windermere, Cape Division.

MEASLES.

There were 86 deaths from measles in the year 1934-35, 6 European and 80 non-European.

In the following table measles mortality figures for the whole City and its

constituent wards are shown for 1934-35 and previous years:-

								V	VAR	DS.	COMPLEXAL SERVICE						
Years (1st July to 30th June).	Race.	Sea Point.	Harbour.	West Central.	Kloof.	Park.	East Central.	Castle.	Woodstock.	Salt River.	Mowbray.	Maitland.	Rondebosch.	Claremont.	Kalk Bay.	Wynberg.	City.
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	
1923–1924	Eur. Non-E.	=	1 5	2 7	1 8	$\frac{2}{1}$	$\frac{2}{45}$		4 7	8		2 3	1 3	$\frac{1}{2}$	2		20 1 16
1924–1925	Eur. Non-E.		_			_	_	1	1	_	_		=		_		$\frac{1}{2}$
1925–1926	Eur. Non-E.				_		1	_		_		 1	$\begin{bmatrix} - \\ 2 \end{bmatrix}$				
1926-1927	Eur. Non-E.		1	2	 1		2 4	1 6	1 1	2	1	7	1 9		2		9 38
1927–1928	Eur. Non-E.		1		_		3			3		1		_	1	1	$\frac{3}{12}$
1928–1929	Eur. Non-E.		_	_	_	_	1	_ 1	$\begin{bmatrix} 2 \\ - \end{bmatrix}$	1	1	2 I		$\frac{1}{2}$		3	9* 9
1929–1930	Eur. Non-E.		_ 1		_	_	_ 5	_ 1	1		-		2	1		2 5	$\begin{array}{c} 3 \\ 17 \end{array}$
1930–1931	Eur. Non-E.		1	1		=		_	_	_	_		12	_		_	- 17
1931-1932	Eur. Non-E.	1		2	1	_	-7	7	3 6	$\frac{1}{3}$		$\frac{2}{2}$	3	$\begin{bmatrix} - \\ 2 \end{bmatrix}$	_ 1	4	8 39
1932–1933	Eur. Non-E.	-				_		_								_	_
1933–1934	Eur. Non-E.		2	2			5	9	1 3							<u> </u>	$\frac{3}{23}$
1934–1935	Eur. Non-E.		 		4		10		1	$\begin{bmatrix} 3 \\ 2 \end{bmatrix}$	$\frac{2}{3}$		$\frac{1}{28}$	7		$\frac{-}{15}$	6 80

*Including 1 case not allocated to any ward (address unobtainable).

The mortality from measles was greater in the year under report than in any year since 1923-24. The epidemic started at the beginning of 1934 and was at its height from June to November, 1934.

The deaths were more numerous amongst non-Europeans than Europeans, there being during the year under report 6 European deaths as compared with 80 non-Europeans. The incidence appeared to be heavy amongst European children as well as non-European, but the case mortality was comparatively light in the former.

All the European deaths were in children under five years of age (under 1 year 2, 1-2 years 2, and 2-5 years 2). Of the non-European deaths 77 were in children under 5 years of age (under 1 year 21, 1-2 years 35, and 2-5 years 21) and 3 in children aged 5-10 years. See Table A, on page 112.

All but one of the deaths in Ward 12, where the mortality was greatest, were in Athlone.

The preponderance of measles mortality in non-Europeans is partly explained by the fact that a larger proportion of the non-European population consists of young children than is the case in the European population. This factor can be approximately corrected for, and the measles mortality expressed as a rate per 1,000 children of either race then proves to be five or six times as great amongst non-Europeans as amongst Europeans. This fact is a reflection of the poverty, bad housing and other associated social evils that obtain amongst the non-Europeans. A similar correlation between measles mortality and social conditions is to be found in the white population of Britain. It is noteworthy that five of the six deaths of European children that occurred in Capetown during the year under review were in Woodstock and Salt River, where the poorer class of Europeans chiefly reside.

WHOOPING COUGH.

There were 24 deaths from this disease for the year 1934-35: 5 European and 19 non-European.

In the following table the whooping cough mortality is shown for the whole City and its constituent wards for 1934-35 and ten previous years:—

							*, -2	WA	RDS	S.							
Years (1st July to 30th June).	Race.	Sea Point.	Harbour.	West Central.	Kloof.	Park.	East Central.	Castle.	Woodstock.	Salt River.	Mowbray.	Maitland.	Rondebosch.	Claremont.	Kalk Bay.	Wynberg.	City.
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	
1924–1925	Eur. Non-E.	1	_		_	_		_	_	3			3	1	3		4 10
1925–1926	Eur. Non-E.			2	1	_	1 3	3	2	1	1	3			I		5 20
1926–1927	Eur. Non-E.			_		_	4	I	1 1	3	1	1 —	3	1 9	_		7 19
1927–1928	Eur. Non-E.	1	1	1 4	1	1	5	7	7	2 3	4	$\frac{2}{12}$	11	3	$\frac{2}{4}$	$\frac{2}{7}$	$\begin{array}{c} -21 \\ 74 \end{array}$
1928–1929	Eur. Non-E.	1	1	1	1	_	$\frac{1}{2}$	3	$\begin{bmatrix} 2 \\ 2 \end{bmatrix}$	3	1	1	3	$\frac{2}{2}$	1 4		$\frac{11}{32}$
1929–1930	Eur. Non-E.	1	1	1			2 2	1	3		1	_	4		3	_	$\begin{array}{c} -6 \\ 15 \end{array}$
1930–1931	Eur. Non-E.		1	6	6		1 7	9	1 2	_ 1	2		4	2 8	1	1 8	9 58
1931–1932	Eur. Non-E.	1	2	3	4		 5	3	_	3	3	1 6	3	3 5			8 44
1932–1933	Eur. Non-E.			2	1 2		-2	2	2 5	1 2		1	2	2 2	6	3	10 32
1933-1934	Eur. Non-E.			2			1	_	3]		6				$\begin{vmatrix} 1 \\ 3 \end{vmatrix}$	1 19*
1934-1935	Eur. Non-E.						2	1	1 3	3		2 4	2	3	W-12 00000		5 19

^{*}Including I case not allocated to any ward (address unobtainable).

Other statistical information for 1934-35 will be found in Table A, on pages 112 and 113 and in the Tables on pages 24 and 28.

22 of the deaths were in children under 5 years of age (under 1 year 8, 1-2 years 7, 2-5 years 7) and 2 in children aged 5-10 years.

DIARRHOEA.

The deaths certified in the year 1934-35 as being due to diarrhoea and enteritis amounted to 440 (46 European and 394 non-European), equivalent to a death rate of 1.53 per 1,000 population (0.31 European and 2.78 non-European).

The deaths were classified as follows: -

years and over) 10	ces.
457 Diarrhoea and enteritis (2 years and over) 16 34 5	0
	0
014 Cholera nostras — — — —	-
015 Dysentery, amoebic 1 3	4
	2
017 Dysentery, other 3	4
Total 46 394 44	:0

In the following table certain death rates calculated on this mortality are shown for the year under report and for the previous ten years, together with the infant mortality rate, which is largely influenced by this cause of death:—

				Deaths	from	Diarrhœ								
Year.		l s at al	l ages	Deaths per l	2 s under 1,000 Bi	2 years	Deaths per l	3 under ,000 bir	l year ths.	Total infant mortality rate from all causes per 1,000 births.				
	Eur.	Non- Eur.	All Races.	Eur.	Non- Eur.	All Races.	Eur.	Non- Eur.	All Races.	Eur.	Non- Eur.	All Races.		
1924-1925 1925-1926 1926-1927 1927-1928 1928-1929 1929-1930 1930-1931 1931-1932 1932-1933 1933-1934 Mean of above 10 years 1934-1935	$ \begin{array}{c} 1 \cdot 00 \\ 0 \cdot 80 \\ 0 \cdot 63 \\ 0 \cdot 50 \\ 0 \cdot 46 \\ 0 \cdot 53 \\ 0 \cdot 50 \\ 0 \cdot 51 \\ 0 \cdot 31 \\ 0 \cdot 36 \\ 0 \cdot 31 \\ \end{array} $	$5 \cdot 92$ $5 \cdot 01$ $4 \cdot 74$ $3 \cdot 83$ $3 \cdot 50$ $3 \cdot 36$ $2 \cdot 89$ $3 \cdot 64$ $2 \cdot 23$ $3 \cdot 39$ $3 \cdot 85$ $2 \cdot 79$	$ \begin{array}{c} 2 \cdot 71 \\ 2 \cdot 53 \\ 2 \cdot 07 \\ 1 \cdot 90 \\ 1 \cdot 87 \\ 1 \cdot 64 \\ 2 \cdot 02 \\ 1 \cdot 24 \\ 1 \cdot 82 \\ 2 \cdot 09 \end{array} $		$93 \cdot 27$ $88 \cdot 30$ $83 \cdot 33$ $68 \cdot 55$ $63 \cdot 07$ $62 \cdot 12$ $54 \cdot 92$ $67 \cdot 41$ $43 \cdot 35$ $64 \cdot 53$ $68 \cdot 89$		27·51 23·58 19·19 10·05 15·29 14·66 15·24 17·83 11·10 9·37 16·38	$\begin{array}{c} 62 \cdot 05 \\ 59 \cdot 39 \\ 58 \cdot 13 \\ 52 \cdot 09 \\ 44 \cdot 40 \\ 42 \cdot 37 \\ 39 \cdot 39 \\ 45 \cdot 93 \\ 32 \cdot 84 \\ 43 \cdot 77 \\ 48 \cdot 04 \\ 38 \cdot 24 \\ \end{array}$	$50 \cdot 77$ $47 \cdot 14$ $46 \cdot 93$ $38 \cdot 09$ $35 \cdot 05$ $33 \cdot 19$ $31 \cdot 64$ $37 \cdot 23$ $26 \cdot 54$ $34 \cdot 20$ $38 \cdot 08$ $30 \cdot 10$	$71 \cdot 94$ $65 \cdot 18$ $67 \cdot 38$ $60 \cdot 28$ $61 \cdot 17$ $60 \cdot 69$ $65 \cdot 04$ $67 \cdot 13$ $48 \cdot 77$ $34 \cdot 75$ $60 \cdot 23$ $50 \cdot 37$	$173 \cdot 93$ $175 \cdot 49$ $186 \cdot 59$ $190 \cdot 62$ $158 \cdot 59$ $160 \cdot 03$ $155 \cdot 80$ $167 \cdot 74$ $143 \cdot 48$ $133 \cdot 27$ $164 \cdot 55$ $146 \cdot 18$	$140 \cdot 43$ $138 \cdot 21$ $148 \cdot 09$ $147 \cdot 36$ $127 \cdot 30$ $127 \cdot 23$ $126 \cdot 67$ $136 \cdot 59$ $116 \cdot 14$ $106 \cdot 08$ $131 \cdot 41$ $119 \cdot 50$		

It will be seen that though there are annual fluctuations there has been a marked tendency for diarrhoeal mortality to decline during the past ten years. In the year under report the rates of mortality were less than in any previous year except 1932-33.

ERRATUM.

For "There were no deaths certified as due to gonorrhoea during the year under" read, "These figures represent only a portion of the mortality due to syphilis. This"



In addition to the 440 deaths recorded above there were during 1934-35, 6 deaths from diarrhoea and enteritis in the native locations of Langa and N'dabeni. These are included in the following table:—

Months.	Race.	L Sea Point.	Barbour.	ω West Central.	4 Kloof.	c, Park,	ο East Central.	de Castle.	ω Woodstock.	6 Salt River.	of Mowbray.	☐ Maitland.	Rondebosch.	El Claremont.	F Kalk Bay.	or Wynberg.	Langa Native Location.	N'dabeni Native Location.	Not Allocated.	Totals: A.	Totals: B.	Temperature of Air in the Shade (Mean at 8 a.m.).	Earth temperature, Range at 4 ft.	Rainfall in inches.	Total Hours of Bright	Sunsinne.
July, 1934 (5 Weeks)	Eur. Non-E.	_	_	_ 1	2	_	9	1 3	- 1			1 2	2	1	1 3	$\frac{1}{9}$	$-\frac{1}{2}$		1	5 35	5	50 · 68	60 · 8 to 64 · 0	2 · 24	hrs. 220	
Aug., 1934 (4 Weeks)	Eur. Non-E.	_	1	2	_	_	6	1	_	1	-			2	3	1		_	_	1 16	1	57.83	60 · 2 to 61 · 8	2.06	194	45
Sept., 1934 (4 Weeks)	Eur. Non-E.	_	_	2	2	_	5	1		_		3	2	1	 1	$\frac{1}{2}$			_	3 18	3	56 · 20	61 ·9 to 65 · 1	1 · 75	225	45
Oct., 1934 (5 Weeks)	Eur. Non-E.	1	1	_	1	1	_ 8	2		$\frac{1}{2}$	_	7	${2}$			3	_		_	$\begin{bmatrix} 2\\26 \end{bmatrix}$	2	61 ·39	65 · 0 to 68 · 3	1 ·84	264	15
Nov., 1934 (4 Weeks)	Eur. Non-E.		1	1		_	1 6	$\frac{}{2}$	1 2		<u>_</u>		7	_	_ 1	6	_	_		$\frac{2}{27}$	2	65 · 42	68 · 9 to 73 · 1	0.68	292	30
Dec., 1934 (4 Weeks)	Eur. Non-E.	_	_	3	5	_	1 4	3	4	2	1	4	1 11	6		4	_	1	=	5 48	6	66 · 29	$73 \cdot 3 \text{ to}$ $76 \cdot 6$	0 · 24	347	35
Jan., 1935 (5 Weeks)	Eur. Non-E.	_			$\frac{1}{2}$	_	1 7	4	3 3	2	1	2	14	112	<u></u>	$\frac{2}{17}$	1	_	_	8 72	8	67 ·46	76 · 8 to 79 · 1	0.49	354	_
Feb., 1935 (4 Weeks)	Eur. Non-E.	1	1 1	_	1 2		110	5		$\begin{bmatrix} 1 \\ 2 \end{bmatrix}$		2	5	2	4	4		_	=	5 37	5	67 · 95	74·9 to 81·4	0 · 12	. 318	05
Mar., 1935 (4 Weeks)	Eur. Non-E.	_	1		1	Ξ	1 4	1	1	3	1	1	8	3	_	4		_	_	5 25	5	62.58	74 · 9 to 80 · 2	0.88	235	30
April, 1935 (5 Weeks)	Eur. Non-E.	_	2	4		_	4	3				1	11	$\frac{1}{2}$	4	6				1 38	1	61 · 43	71 · 3 to 74 · 2	2 · 49	194	10
May, 1935 (4 Weeks)	Eur. Non-E.		-	2	1		4	3	1 3	$\frac{1}{2}$	1	1 1	4	8	_ _ 4	- <u>-</u>	 1	_	_	39	3	54 · 90	65 · 3 to 71 · 2	3 · 48	213	10
June, 1935 (4 Weeks)	Eur. Non-E.	_	1	_	1		1	2	1 1	1 3		1	1 4	1 2	2	1			_	$\begin{bmatrix} 6 \\ 19 \end{bmatrix}$			61 ·6 to 65 ·1	1 · 12	198	35
Year (52 Weeks)	Eur. Non-E.	2	1 9	17	$\begin{bmatrix} 3 \\ 17 \end{bmatrix}$	1	5 68	$\frac{1}{30}$	$\begin{array}{ c c }\hline 7\\14\\ \end{array}$	913	2 4	$\frac{3}{24}$	$\frac{2}{70}$	4 38	$\frac{1}{29}$	4 61	5	- 1	1	46 400			60·2 to 81·4	17:39	3,058	55

A. Corrected for outward transfers.

B. Corrected for outward and inward transfers.

It will be seen that the mortality was highest during December and January and lowest during August, September and October.

Of the European deaths from these causes (corrected for outward transfers), 22 or 48 per cent. were in children under one year of age, and 31 or 67 per cent. in children under 5 years of age. The corresponding figures for the non-European deaths, including deaths in the native locations, were 246 or 62 per cent. under one and 389 or 97 per cent. under 5.

VENEREAL DISEASES.

The number of deaths (corrected for outward transfers) certified during the year 1934-35 as being due to syphilis was 115, 103 of non-Europeans and 12 of Europeans. Of the 103 deaths of non-Europeans, 61 were of children under one year of age and 76 under five years of age. Of the 12 European deaths, 2 were of children under one year of age, and the remainder adults.

The deaths from this disease for the past ten years are shown in the table on

page 24.

There were no deaths certified as due to gonorrhoen during the year under is because of two reasons. In the first place there is often a reluctance to state on the death certificate that the cause of the death was a venereal disease, and consequently the cause is certified in a form less painful to the friends of the deceased. In the second place there are a large number of fatal affections of different organs in the body, especially certain diseases of the circulatory and

nervous systems, that are the result of syphilitic infection, and these are usually so certified that the venereal actiology of the condition does not manifest itself in the death statistics. They do not reflect, also, the ante-natal deaths that result from syphilitic infection.

There were no deaths certified as due to gonorrhea during the year under

report.

The Council's scheme for the treatment of venereal disease included (a) municipal treatment centres and (b) in-patient treatment at the City Hospital. Part of the approved expenditure on these services is repaid to the Council by the Union Government.

Municipal Treatment Centres.—There are three treatment centres for venereal diseases, viz., at the City Hospital, Portswood Road, Capetown, at Salt

River Road, Woodstock, and at Church Street, Wynberg.

During the year under review there have been held 199 sessions for males and 244 for females at the City Hospital, 197 for males and 200 for females at Salt River, and 97 for males and 101 for females at Wynberg. Anti-syphilitic treatment of mothers and children is also given at the pre-natal clinics at the maternal and child welfare centres.

Particulars of the work done at the treatment centres and pre-natal clinics

will be found on page 96.

Cards in both official languages containing warning notices in regard to these diseases, and the times of the clinics at the treatment centres, are hung up in all the public conveniences for both sexes, and they have been supplied for similar use in conveniences controlled by the Railway Administration and at factories, etc., throughout the City. They have also been supplied for display

in chemists' shops.

In-patient Treatment.—There are wards at the City Hospital, Portswood Road, with beds for 24 venereal disease patients, giving separate accommodation for males and females, European and non-European. During the year ended 30th June, 1935, the cases of venereal disease that were admitted from Capetown numbered 187 (66 European and 121 non-European), and from outside the Municipality and from ships in the Capetown Harbour 30 (15 European and 15 non-European).

Particulars in regard to the cases at the City Hospital will be found in the

report of the Medical Superintendent on page 100.

Propaganda.—Good work is being done by the Capetown Society for Combating Venereal Disease. This body was formed at a public meeting held for the purpose in October, 1933, and is affiliated with the British Social Hygiene Council. It receives annual subsidies from the Union Government (£100), the City Council (£50), and the Cape Divisional Council (£25).

The operations of the Society have consisted chiefly in the holding of public meetings, where medical addresses and cinematograph exhibitions are given on the subject of venereal disease. Pamphlets have been printed by the Society and are used mainly for distribution at the public meetings, which are well attended.

The Society works in close co-operation with the City Health Department. This is ensured by the fact that the Hon. Secretary is Dr. C. K. O'Malley, the Medical Officer in charge of Venereal Disease Clinics.

CANCER.

The number of deaths (corrected for outward transfers) certified during the year 1934-35 as being due to cancer or malignant disease was 281 (119 males and 162 females), of which 184 (79 males and 105 females) were of Europeans and 97 (40 males and 57 females) were of non-Europeans.

The death rates for cancer per 1,000 population concerned (corrected for outward and inward transfers for Europeans and for outward transfers for the

whole population and for non-Europeans) was therefore:

For the whole population ... 0.98 (males 0.84; females 1.12) For Europeans 1.26 (males 1.10; females 1.42) For non-Europeans 0.69 (males 0.57; females 0.80)

From the foregoing figures it will be observed that the recorded rate of mortality from this disease amongst Europeans was greater by 83 per cent. than amongst non-Europeans.

The variation in cancer mortality during the past ten years is shown in the table on page 25, where it will be seen that the European rate for the year under report was higher than that of the previous decennium.

The parts of the body affected in deaths from cancer, and other facts, are

shown in Table A on pages 114 to 117.

SECTION IV.—MATERNAL AND CHILD WELFARE AND THE WORK OF THE HEALTH VISITORS.

The work in this branch of the City Health Department during the year has continued with little of special note.

The attendances of infants at the welfare centres showed some falling off as compared with the previous years, especially in the group over one year of age. This is in part due to the admission of children to school earlier than formerly. Many children of five and six years of age now attend school who would formerly have attended welfare centres. The small decline in the number of new attendances under one year of age is accounted for by the decrease in the number of births: the number of such new cases was actually greater than last year in proportion to the number of births.

The problem of the working mother is an urgent one, and indicates the need for nursery schools and day nurseries in various parts of the Peninsula. Many cases of neglected children were brought to the notice of medical officers of this department, and these were frequently due to an infant being left in the charge of a young child or with an unsuitable person while the mother was working.

Pre-natal clinics show an encouraging increase in attendances, and in many areas this is due to the improved co-operation of the midwives.

Owing to the number of expectant mothers resident in the Cape Divisional Council area attending the Maitland pre-natal clinic, a grant was made by the Divisional Council in respect of an additional monthly pre-natal clinic for such cases. This was opened on August 11th, 1934.

NOTIFICATION OF BIRTHS.

The Regulations re Early Notification of Births (made by the Minister of Public Health in 1920) require the notification of births in the Municipality within 24 hours.

During the year 1934-35 the number of births (and still-births) notified was 9,845, as follows:—

Notified by midwives and nurses (other than extern	
or intern institutional cases)	6,035
Notified by doctors	
Notified by institutions (extern or intern)	3,534
Notified by parents and others	275

In the table on the next page, the births (and still-births) notified as having taken place in the Municipality during the year are classified according to the manner in which the mothers were attended.

The following is a summary of the results:

In private houses:

Attended. By private doctors By private midwives By public midwives or midwife students	Births. 708 5,495 1,346	Percentage. 7.6 59.2 14.5
	7,549	81:3
In Institutions:		
Public institutions	1,287	13.9
Private nursing homes	445	4.8
	1,732	18.7

BUTHS AND STILL-BIRTHS NOTIFIED. CLASSIFIED AS TO ATTENDANCE AT CONFINEMENT AND AS TO HOME ADDRESS OF MOTHER, FOR THE YEAR 1ST JULY, 1934 TO 30TH JUNE, 1935. CALENDAR

from		dents	Non-Resi	17	111 211	1 60	L & 4	71 37 99 11 11 2	391
70	ive		N'da- beni		-	111		1 6	=
Excl	Native Locations		Lan-ga		6	117		36 1 1	55
			Total of Wards	708	1,790 3,705	9 162 371	7111 111 822	210 238 749 84 5 1 445	9,281
			Not allo- cated.	23	14	111	1111	" " "	10
		15	Wyn- berg	96	160	111		17 17 50 7 1	1,069
		14	Kalk Bay	49	23		1 - 1 1	3 11 20 4 4 —	462
		13	Clare- mont	68	226 457	-		177 288 53 3 2	935
		12	Ronde de- bosch	63	385 483	100	-	10 28 28 33 1 1 33	1,079
Ущу	ΤΙ.	11	Mait- land	48	134	171		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	677
TO STEED	HE CI	10	Mow- bray	49	107		-	21 32 1 1 38	309
110		6	Salt Piver	77	202 247	1 29	1 2	14 8 70 4 12	929
	WAKDS	∞	Wood-stock	59	149 264	1 73	40	6 7 79 5 1 11	969
177	W	1-	Castle	5	131 244	1 62 4-	187	33 777 8	824
		9	East Cen- tral	34	180	3 130	315 4 42 1	21 18 112 10 10 17	1,188
	,	10	Kloof Park	10	110	co — +H	13	35 4 4 5 1 1 5 1 4 4 6	177
		-	Kloof	26	39	1 66 29	59	33 47 14 14 14 14 14	502
		೯೦	West Cen- tral		16	55	54	10 21 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	263
		ç I	Har- bour	6	16	31	37	6 1 1 1 4	187
		-	Nea Point	43	11 10	. 67	61	18 4 20 4 108	222
		CLASSIFICATION.		A. Private Doctors B. Private Midwives (including any	non-medical persons attending a confinement) (1) Certificated (2) Uncertificated	C. Midwives (or midwife students) from (1) Booth Memorial Home (2) St. Monica's Home (3) Peninsula Maternity Hospital	(4) (5) (4) (4) (6) (6) (6) (6) (6) (6)	ial Hom Home Home ternity I Luin Ple uis Instituti	TOTALS

Births actually occurring in the Native Locations are excluded from the above table. They numbered 71 for Langa and 20 for N'dabeni: Total 91.

SUPERVISION OF MIDWIFERY.

This section forms an important part of the work in maternal and child welfare.

When the Union Government Regulations came into force in June, 1931, a legal basis for the control of midwifery was provided, which was further strengthened by the Public Health Amendment Act of 1935.

A list is kept of persons, other than medical practitioners, practising midwifery in the Municipal area. No person may practise midwifery whose name is not on the list. The Council may refuse to place on the list or may remove from the list the name of any person whose practising it considers would be prejudicial to the public health. Such refusal is subject to confirmation in the case of certified midwives by the South African Medical Council, and in the case of uncertified midwives by the Minister of Public Health.

Midwives desiring to practise in the Municipality must apply to the Medical Officer of Health and must submit a medical certificate of freedom from infectious conditions. They must conform to certain standards as regards personal cleanliness, clothing, midwifery bags, and the conduct of cases, and must keep a prescribed register of cases, which must be submitted for inspection periodically.

For the prevention of ophthalmia neonatorum the midwife is required to cleanse the eyes of every new-born infant attended by her immediately after birth and to instil a prescribed silver solution. The Council provides gratis the material necessary for this.

One of the health visitors is appointed as supervisor of midwives. Under the control of the lady medical officer she undertakes the guidance and instruction of untrained midwives. She is able to see them actually at work and to report on their capabilities. She assists at the periodical inspection of midwives and gives suitable demonstrations. The midwives are encouraged to attend with their patients at the pre-natal clinics.

The transactions on the list of midwives in 1934-35 are indicated by the following table:—

$\operatorname{Mid}_{\mathbf{w}ives}.$	Certifi	icated.	Uncert	Total.	
	Eur.	Non-E.	Eur.	Non-E.	
On list 30th June, 1934 Added to list during 1934-35 Removed from list during 1934-35 by	122 16	36 5	22	82	262 22
resolution of Council		_	1	8	9
Municipality On list 30th June, 1935	22 11 6	3 38	21	7 68	32 243

One application (from a non-European uncertificated woman) to be added to the list was refused by resolution of the Council.

It will be seen that on the 30th June, 1935, there were on the list 154 certificated midwives (116 European and 38 non-European) and 89 uncertificated (21 European and 68 non-European). During the year under review, of a total of 9,281 births, 3,705, or 40 per cent., were attended by uncertificated persons. In the previous year the figure was 43 per cent.

In nine instances during the year under report it was found necessary to remove the names of midwives from the list and prohibit their practising any more. One woman was prosecuted for persisting in practising in spite of such prohibition. The case was discharged by the magistrate.

During the year 1934-35 18 midwifery inspections were held at welfare centres. Attendances of midwives at these inspections totalled 310.

40 midwives were referred for special interview with a medical officer in connection with their work.

14 midwives were reprimanded by letter.

24 lying-in-homes were inspected.

Free medical attention was arranged for in 102 cases of difficult confinement.

The services of a midwife were paid for from a charitable fund in 9 cases, and three fitted baskets, provided by the same fund, were used for lending in necessitous cases.

Five maternity bags were equipped for emergency cases at child welfare centres, and one for a native woman at Athlone for work amongst her own people.

The existence of certain public and charitable institutions which undertake outdoor midwifery makes it possible for expectant mothers of small means to obtain the services of a midwife at low cost in the areas served by these institutions. These, however, can extend their services only to women whose homes are within a reasonable distance, and for the greater part of the municipal area the present position with regard to midwifery services of the poorer section of the community is unsatisfactory.

Where the wage earner is unemployed or the earnings small, it is often impossible to make provision for the expenses of confinement and the payment of a midwife: and for this reason, in many parts of the Municipality trained midwives cannot make a living. The untrained midwife often carries on her work under the most unsuitable conditions and may receive little or no payment for her services. Many women make no effort to obtain the attendance of a midwife and rely on emergency help at the last minute.

A small fund has been set aside from a charitable source to assist in the payment of a midwife for necessitous cases attending municipal pre-natal clinics, but this can only be extended to a very few.

HEALTH VISITORS.

The number of health visitors in this section (June, 1935), is 24, besides one whose time is devoted to work in connection with diphtheria prophylaxis, and four whose duties are entirely in connection with tuberculosis. In addition there are the chief health visitor, the social welfare investigator, and the supervisor of midwives. The work of the health visitors is primarily educational and preventive in nature. Some of their duties are given below:—

- 1. Visits to houses where births have occurred. In the cases attended by untrained midwife, the visit is postponed until after the tenth day, when the attendance of the midwife has ordinarily ceased, but in the cases attended by uncertificated persons, the visit is made as soon as possible after the birth, to see that all is well with the mother and child. Advice is given as to the proper care and feeding of the infant and the mother is invited to bring her baby to the nearest centre as soon as she is able.
- 2. Visits are also made in connection with protected infants, i.e., those children under seven years of age who, not being in the care of their own parents or near relatives, are under the supervision of the resident magistrate (Children's Protection Act No. 25 of 1913). The health visitors report on these children every three months, and their reports are forwarded to the magistrate.
- 3. Visits are made to expectant mothers wherever possible, to advise and assist them in making arrangements for their confinements, and to supplement the work of the pre-natal clinics.
- 4. Cases of ophthalmia neonatorum, puerperal fever, pneumonia, measles, whooping cough, etc., are visited and advice given where necessary as to nursing and precautions to be taken.
- 5. Investigations are made for the purpose of assessment of fees in certain cases admitted to the City Hospital and enquiries made into indigent cases of confinement where fees are payable to a medical practitioner called in by a midwife under the Council's scheme.
- 6. Each health visitor also assists at certain of the sessions of the welfare centre for her area.

The following table shows the number of visits made during 1934-35 and previous years by the health visitors, including the special health visitors for tuberculosis and diphtheria prophylaxis, the supervisor of midwives and the social welfare investigator:—

,			Nu	mber of	Visits.				
1934-35	1933-34	1932-33	1931-32	1930-31	1929-30	1928-29	1927-28	1926-27	1925-26
9,360	9,822	9,649	10,029	10,510	9,637	9,504	8,657	7,933	7,270
32,399	34,741	35,558	31.951	34,334	31,405	29,473	27,706	27,498	21,863
729	736	457	466	226	166	327	293	278	163
3,890								1,966	1,638
6,547	6,087	6,624	6,265	6,450	5,234	8,026	5,741	4,003	1,793
109 324 51 56	239 97 18 310	74 8 76	69 56 34 37	96 125 99 23	82 38 14 8	93 75 4 27	84 72 28 37	84 202 40 80	69 24 13 69
919	765	845	927	1,058	615	510	476	397	343
$\begin{vmatrix} 15 \\ 15 \\ 22 \\ 42 \end{vmatrix}$	2 8	$egin{array}{c} 109 \ 12 \ 22 \ \end{array}$	13 264	11 268	40 631	22 555	16 488	$\begin{array}{c} 380 \\ 8 \\ 262 \end{array}$	266 8 269
1,220 2,171 288 1,248	2,686 1,976 146 815	1,756 1,118 161 1,098	1,666 1,434 138 567	1,118 64	748 46	1,186	1,333 58	947 63	1,158 13
57 27	73 40	147 31	165 29	188 48	125 11	33	$\begin{bmatrix} 140 \\ 24 \end{bmatrix}$	81 27	27 —
6	30	3	10	12	39	63	19	15	11
141	218	258	273	191	87	75			
642 635	5,067	5,731	4,216	4,232	2,499	1,762	3,241	2,623	1,220
	_			-			270	396	
3,056	2,195	4,309	3,373	4,541	3,782	2,517	1,924		
70,289	71,894	73,676	67,348	68,593	59,059	58,291	53,432	47,301	36,227
60	12	9	27	28	28	29	81	83	113
	9,360 32,399 729 2,480 3,091 3,890 6,547 109 324 51 56 10 919 754 15 22 42 1,220 2,171 288 1,248 57 27 6 141 642 635 — 3,056 70,289	9,360 9,822 32,399 34,741 729 736 2,480 2,200 3,091 3,253 3,890 6,547 6,087 109 239 324 97 51 18 56 310 10 26 919 765 754 344 15 2 22 8 42 1,220 2,686 2,171 1,976 288 146 1,248 815 57 73 27 40 6 30 141 218 642 635 5,067 — 3,056 2,195 70,289 71,894	9,360 9,822 9,649 32,399 34,741 35,558 729 736 457 2,480 2,200 2,278 3,091 3,253 3,123 3,890 6,547 6,087 6,624 109 239 74 324 97 8 51 18 76 56 310 11 10 26 18 919 765 845 754 344 309 15 2 12 22 8 22 42 1,756 1,118 1,220 2,686 1,756 2,171 1,976 1,118 288 146 161 1,248 815 1,098 57 73 147 27 40 31 6 30 3 141 218 258 642 5,067 5,731 — 3,056 2,195 4,309 <td>1934-35 1933-34 1932-33 1931-32 9,360 9,822 9,649 10,029 32,399 34,741 35,558 31.951 729 736 457 466 2,480 2,200 2,278 1,713 3,091 3,253 3,123 3,166 6,547 6,087 6,624 6,265 109 239 74 69 324 97 8 56 51 18 76 34 56 310 11 37 10 26 18 26 919 765 845 927 754 344 309 461 15 2 12 13 22 8 22 264 42 1,976 1,118 1,434 1,248 815 1,098 567 57 73 147 165 27 40 31 29 6 30 3 10 <tr< td=""><td>1934-35 1933-34 1932-33 1931-32 1930-31 9,360 9,822 9,649 10,029 10,510 32,399 34,741 35,558 31,951 34,334 729 736 457 466 226 2,480 2,200 2,278 1,713 1,381 3,091 3,253 3,123 3,166 3,229 6,547 6,087 6,624 6,265 6,450 109 239 74 69 96 324 97 8 56 125 51 18 76 34 99 324 97 8 56 125 51 18 76 34 99 56 310 11 37 23 10 26 18 26 24 919 765 845 927 1,058 754 344 309 461 365 15 2 12 13 11 22 8 <td< td=""><td>9,360 9,822 9,649 10,029 10,510 9,637 32,399 34,741 35,558 31.951 34.334 31,405 729 736 457 466 226 166 2,480 2,200 2,278 1,713 1,381 762 3,091 3,253 3,123 3,166 3,229 2,699 6,547 6,087 6,624 6,265 6,450 5,234 109 239 74 69 96 82 324 97 8 56 125 38 51 18 76 34 99 14 56 310 11 37 23 8 10 26 18 26 24 25 919 765 845 927 1,058 615 754 344 309 461 365 366 21 13 11 40 268 631 1,220 2,686 1,756 1,666 1,118 1,48 46 1,248 815 1,098 567 1 48 1 27 40 31 29 48 <</td><td>1934-35 1933-34 1932-33 1931-32 1930-31 1929-30 1928-29 9,360 9,822 9,649 10,029 10,510 9,637 9,504 32,399 34,741 35,558 31.951 34,334 31,405 29,473 729 736 457 466 226 166 327 2,480 2,200 2,278 1,713 1,381 762 980 3,091 3,253 3,123 3,166 3,229 2,699 2,479 3,890 6,547 6,087 6,624 6,265 6,450 5,234 8,026 109 239 74 69 96 82 93 324 97 8 56 125 38 75 51 18 76 34 99 14 4 45 310 11 37 23 8 27 10 26 184 26 24</td><td>1934-35 1933-34 1932-33 1931-32 1930-31 1929-30 1928-20 1927-28 9,360 9,822 9,649 10,029 10,510 9,637 9,504 8,657 32,399 34,741 35,558 31.951 34,334 31,405 29,473 27,706 729 736 457 466 226 166 327 293 2,480 2,200 2,278 1,713 1,381 762 980 195 3,091 3,253 3,123 3,166 3,229 2,699 2,479 2,102 6,547 6,087 6,624 6,265 6,450 5,234 8,026 5,741 109 239 74 69 96 82 93 84 56 310 711 37 23 8 27 37 10 26 18 26 24 25 29 51 919 765 845</td><td>1934-35 1933-34 1932-33 1931-32 1930-31 1929-30 1928-29 1927-28 1926-27 9,360 9,822 9,649 10,029 10,510 9,637 9,504 8,657 7,933 32,399 34,741 35,558 31,951 34,334 31,405 29,473 27,706 27,498 729 736 457 466 226 166 327 293 278 2,480 2,200 2,278 1,713 1,381 762 980 195 3,091 3,253 3,123 3,166 3,229 2,699 2,479 2,102 1,966 6,547 6,087 6,624 6,265 6,450 5,234 8,026 5,741 4,003 109 239 74 69 96 82 93 84 84 324 97 8 56 125 38 75 72 202 51 18 26 <</td></td<></td></tr<></td>	1934-35 1933-34 1932-33 1931-32 9,360 9,822 9,649 10,029 32,399 34,741 35,558 31.951 729 736 457 466 2,480 2,200 2,278 1,713 3,091 3,253 3,123 3,166 6,547 6,087 6,624 6,265 109 239 74 69 324 97 8 56 51 18 76 34 56 310 11 37 10 26 18 26 919 765 845 927 754 344 309 461 15 2 12 13 22 8 22 264 42 1,976 1,118 1,434 1,248 815 1,098 567 57 73 147 165 27 40 31 29 6 30 3 10 <tr< td=""><td>1934-35 1933-34 1932-33 1931-32 1930-31 9,360 9,822 9,649 10,029 10,510 32,399 34,741 35,558 31,951 34,334 729 736 457 466 226 2,480 2,200 2,278 1,713 1,381 3,091 3,253 3,123 3,166 3,229 6,547 6,087 6,624 6,265 6,450 109 239 74 69 96 324 97 8 56 125 51 18 76 34 99 324 97 8 56 125 51 18 76 34 99 56 310 11 37 23 10 26 18 26 24 919 765 845 927 1,058 754 344 309 461 365 15 2 12 13 11 22 8 <td< td=""><td>9,360 9,822 9,649 10,029 10,510 9,637 32,399 34,741 35,558 31.951 34.334 31,405 729 736 457 466 226 166 2,480 2,200 2,278 1,713 1,381 762 3,091 3,253 3,123 3,166 3,229 2,699 6,547 6,087 6,624 6,265 6,450 5,234 109 239 74 69 96 82 324 97 8 56 125 38 51 18 76 34 99 14 56 310 11 37 23 8 10 26 18 26 24 25 919 765 845 927 1,058 615 754 344 309 461 365 366 21 13 11 40 268 631 1,220 2,686 1,756 1,666 1,118 1,48 46 1,248 815 1,098 567 1 48 1 27 40 31 29 48 <</td><td>1934-35 1933-34 1932-33 1931-32 1930-31 1929-30 1928-29 9,360 9,822 9,649 10,029 10,510 9,637 9,504 32,399 34,741 35,558 31.951 34,334 31,405 29,473 729 736 457 466 226 166 327 2,480 2,200 2,278 1,713 1,381 762 980 3,091 3,253 3,123 3,166 3,229 2,699 2,479 3,890 6,547 6,087 6,624 6,265 6,450 5,234 8,026 109 239 74 69 96 82 93 324 97 8 56 125 38 75 51 18 76 34 99 14 4 45 310 11 37 23 8 27 10 26 184 26 24</td><td>1934-35 1933-34 1932-33 1931-32 1930-31 1929-30 1928-20 1927-28 9,360 9,822 9,649 10,029 10,510 9,637 9,504 8,657 32,399 34,741 35,558 31.951 34,334 31,405 29,473 27,706 729 736 457 466 226 166 327 293 2,480 2,200 2,278 1,713 1,381 762 980 195 3,091 3,253 3,123 3,166 3,229 2,699 2,479 2,102 6,547 6,087 6,624 6,265 6,450 5,234 8,026 5,741 109 239 74 69 96 82 93 84 56 310 711 37 23 8 27 37 10 26 18 26 24 25 29 51 919 765 845</td><td>1934-35 1933-34 1932-33 1931-32 1930-31 1929-30 1928-29 1927-28 1926-27 9,360 9,822 9,649 10,029 10,510 9,637 9,504 8,657 7,933 32,399 34,741 35,558 31,951 34,334 31,405 29,473 27,706 27,498 729 736 457 466 226 166 327 293 278 2,480 2,200 2,278 1,713 1,381 762 980 195 3,091 3,253 3,123 3,166 3,229 2,699 2,479 2,102 1,966 6,547 6,087 6,624 6,265 6,450 5,234 8,026 5,741 4,003 109 239 74 69 96 82 93 84 84 324 97 8 56 125 38 75 72 202 51 18 26 <</td></td<></td></tr<>	1934-35 1933-34 1932-33 1931-32 1930-31 9,360 9,822 9,649 10,029 10,510 32,399 34,741 35,558 31,951 34,334 729 736 457 466 226 2,480 2,200 2,278 1,713 1,381 3,091 3,253 3,123 3,166 3,229 6,547 6,087 6,624 6,265 6,450 109 239 74 69 96 324 97 8 56 125 51 18 76 34 99 324 97 8 56 125 51 18 76 34 99 56 310 11 37 23 10 26 18 26 24 919 765 845 927 1,058 754 344 309 461 365 15 2 12 13 11 22 8 <td< td=""><td>9,360 9,822 9,649 10,029 10,510 9,637 32,399 34,741 35,558 31.951 34.334 31,405 729 736 457 466 226 166 2,480 2,200 2,278 1,713 1,381 762 3,091 3,253 3,123 3,166 3,229 2,699 6,547 6,087 6,624 6,265 6,450 5,234 109 239 74 69 96 82 324 97 8 56 125 38 51 18 76 34 99 14 56 310 11 37 23 8 10 26 18 26 24 25 919 765 845 927 1,058 615 754 344 309 461 365 366 21 13 11 40 268 631 1,220 2,686 1,756 1,666 1,118 1,48 46 1,248 815 1,098 567 1 48 1 27 40 31 29 48 <</td><td>1934-35 1933-34 1932-33 1931-32 1930-31 1929-30 1928-29 9,360 9,822 9,649 10,029 10,510 9,637 9,504 32,399 34,741 35,558 31.951 34,334 31,405 29,473 729 736 457 466 226 166 327 2,480 2,200 2,278 1,713 1,381 762 980 3,091 3,253 3,123 3,166 3,229 2,699 2,479 3,890 6,547 6,087 6,624 6,265 6,450 5,234 8,026 109 239 74 69 96 82 93 324 97 8 56 125 38 75 51 18 76 34 99 14 4 45 310 11 37 23 8 27 10 26 184 26 24</td><td>1934-35 1933-34 1932-33 1931-32 1930-31 1929-30 1928-20 1927-28 9,360 9,822 9,649 10,029 10,510 9,637 9,504 8,657 32,399 34,741 35,558 31.951 34,334 31,405 29,473 27,706 729 736 457 466 226 166 327 293 2,480 2,200 2,278 1,713 1,381 762 980 195 3,091 3,253 3,123 3,166 3,229 2,699 2,479 2,102 6,547 6,087 6,624 6,265 6,450 5,234 8,026 5,741 109 239 74 69 96 82 93 84 56 310 711 37 23 8 27 37 10 26 18 26 24 25 29 51 919 765 845</td><td>1934-35 1933-34 1932-33 1931-32 1930-31 1929-30 1928-29 1927-28 1926-27 9,360 9,822 9,649 10,029 10,510 9,637 9,504 8,657 7,933 32,399 34,741 35,558 31,951 34,334 31,405 29,473 27,706 27,498 729 736 457 466 226 166 327 293 278 2,480 2,200 2,278 1,713 1,381 762 980 195 3,091 3,253 3,123 3,166 3,229 2,699 2,479 2,102 1,966 6,547 6,087 6,624 6,265 6,450 5,234 8,026 5,741 4,003 109 239 74 69 96 82 93 84 84 324 97 8 56 125 38 75 72 202 51 18 26 <</td></td<>	9,360 9,822 9,649 10,029 10,510 9,637 32,399 34,741 35,558 31.951 34.334 31,405 729 736 457 466 226 166 2,480 2,200 2,278 1,713 1,381 762 3,091 3,253 3,123 3,166 3,229 2,699 6,547 6,087 6,624 6,265 6,450 5,234 109 239 74 69 96 82 324 97 8 56 125 38 51 18 76 34 99 14 56 310 11 37 23 8 10 26 18 26 24 25 919 765 845 927 1,058 615 754 344 309 461 365 366 21 13 11 40 268 631 1,220 2,686 1,756 1,666 1,118 1,48 46 1,248 815 1,098 567 1 48 1 27 40 31 29 48 <	1934-35 1933-34 1932-33 1931-32 1930-31 1929-30 1928-29 9,360 9,822 9,649 10,029 10,510 9,637 9,504 32,399 34,741 35,558 31.951 34,334 31,405 29,473 729 736 457 466 226 166 327 2,480 2,200 2,278 1,713 1,381 762 980 3,091 3,253 3,123 3,166 3,229 2,699 2,479 3,890 6,547 6,087 6,624 6,265 6,450 5,234 8,026 109 239 74 69 96 82 93 324 97 8 56 125 38 75 51 18 76 34 99 14 4 45 310 11 37 23 8 27 10 26 184 26 24	1934-35 1933-34 1932-33 1931-32 1930-31 1929-30 1928-20 1927-28 9,360 9,822 9,649 10,029 10,510 9,637 9,504 8,657 32,399 34,741 35,558 31.951 34,334 31,405 29,473 27,706 729 736 457 466 226 166 327 293 2,480 2,200 2,278 1,713 1,381 762 980 195 3,091 3,253 3,123 3,166 3,229 2,699 2,479 2,102 6,547 6,087 6,624 6,265 6,450 5,234 8,026 5,741 109 239 74 69 96 82 93 84 56 310 711 37 23 8 27 37 10 26 18 26 24 25 29 51 919 765 845	1934-35 1933-34 1932-33 1931-32 1930-31 1929-30 1928-29 1927-28 1926-27 9,360 9,822 9,649 10,029 10,510 9,637 9,504 8,657 7,933 32,399 34,741 35,558 31,951 34,334 31,405 29,473 27,706 27,498 729 736 457 466 226 166 327 293 278 2,480 2,200 2,278 1,713 1,381 762 980 195 3,091 3,253 3,123 3,166 3,229 2,699 2,479 2,102 1,966 6,547 6,087 6,624 6,265 6,450 5,234 8,026 5,741 4,003 109 239 74 69 96 82 93 84 84 324 97 8 56 125 38 75 72 202 51 18 26 <

SOCIAL WELFARE INVESTIGATOR.

In connection with the maternal and child welfare section, many cases come to the notice of medical officers and health visitors which require advice and guidance from the social and moral standpoint, especially in connection with the unmarried mother.

A record of work done during the year 1934-35 by the social welfare investigator is given below:—

New cases investigated		722
Visits to institutions		
Visits to cases	1,524	
Visits to Government offices	142	
Other visits	741	
		0.070
Total visits		3,056
Office consultations		1,269

MATERNAL AND CHILD WELFARE CENTRES.

Nine Maternal and Child Welfare Centres are maintained, viz .: -

City Health Department, 12, Keerom Street, Capetown.

Aspeling Street, Capetown.

St. James Street, Woodstock.

Norfolk Road, Maitland.

Lawrence Road, Athlone.

Station Road, Claremont.

Lansdowne Hall, Lansdowne.

Town Hall, Wynberg.

Retreat Road, Retreat.

In addition to the above a weekly infant consultation for natives is held at the Langa location hospital.

At these centres 49 medical sessions per week were being held at the end of the year under report, as follows:—

nder report	, and	101101	V D •		
			Infant Consu	ultations.	
Keerom Str	eet		Tuesdays	2 p.m.	Non-Europeans.
		• •	Wednesdays	2 p.m.	Europeans.
			Thursdays	2 p.m.	Non-Europeans.
			Fridays	2 p.m.	Europeans.
Aspeling Str	root.		Mondays	^	-
Aspening 50	reet	• •	Tuesdays	2 p.m.	Non-Europeans.
			Thursdays	2 p.m. 9 a.m.	Non-Europeans.
			Fridays	9 a.m.	Non-Europeans.
XX7 I - 4 1-				^	Non-Europeans.
Woodstock		* *	Mondays	9 a.m.	Non-Europeans.
			Mondays	2 p.m.	Europeans.
			Tuesdays	2 p.m.	Non-Europeans.
			Wednesdays		Non-Europeans.
			Wednesdays		Europeans.
70.001			Thursdays	2 p.m.	Europeans.
Maitland	• •	• •	Tuesdays	2 p.m.	Non-Europeans.
			Wednesdays		Non-Europeans.
			Thursdays	9 a.m.	Europeans.
Langa Loca	tion	٠.	Tuesdays	9 a.m.	Natives (1).
Athlone			Tuesdays	9 a.m.	Non-Europeans.
			Thursdays	9 a.m.	Europeans (1).
			Thursdays	2 p.m.	Non-Europeans.
Claremont			Mondays	2 p.m.	Non-Europeans.
0.01.011.011.0	• •	• •	Wednesdays	9 a.m.	Non-Europeans.
			Fridays	9 a.m.	Europeans.
Lansdowne			· ·		
Lansdowne		• •	Tuesdays	9 a.m.	Europeans (1).
5 4 7 3			Wednesdays	,	Non-Europeans.
Wynberg			Tuesdays	$\frac{2}{2}$ p.m.	Non-Europeans.
			Thursdays	2 p.m.	Non-Europeans.
			Fridays	2 p.m.	Europeans.
Retreat			Mondays	2 p.m.	Non-Europeans.
			Thursdays	9 a.m.	Europeans (2).
			Thursdays	2 p.m.	Non-Europeans.
			Pre-natal C	linics	
Aspeling Str	eat		Thursdays	_	The second of th
rispeting ou	cet	• •	Fridays	2 p.m. 2 p.m.	Europeans and Non-Europeans.
Woodstock			Wednesdays	2 2	Europeans & Non-Europeans(3).
11 OOGSTOCK	• •	• •	Fridays	2 p.m. 2 p.m.	Europeans.
Maitland					Non-Europeans.
Maitland	• •	• •	Wednesdays	2 p.m.	Europeans and Non-Europeans.
			First	9	E
Athlone			Thursday Wednesdays	2 p.m.	Europeans & Non-Europeans (4).
Claremont	• •	• •	Fridays	9 a.m.	Europeans and Non-Europeans.
Wynberg			Tuesdays	2 p.m. 9 a.m.	Europeans and Non-Europeans.
Retreat			Wednesdays	9 a.m. 2 p.m.	Europeans and Non-Europeans.
4 - (- 0 2 0 6 0	• •	• •	Thursdays	9 a.m.	Non-Europeans. Europeans (2).
					Europeans (2).
			Dental Cla	inic.	
Woodstock			Tuesdays	9 a.m.	Non-Europeans.
			Tuesdays	2 p.m.	Non-Europeans,
			Thursdays	2 p.m.	Europeans.
			School Cli		
Woodstock					70
Woodstock	• •		Mondays	2 p.m.	Europeans and Non-Europeans(5).
Maitland			Fridays	9 a.m.	Europeans and Non-Europeans
Claremont		• •	Mondays	9 a.m.	Europeans and Non-Europeans.
Retreat			Thursdays	9 a.m.	Europeans and Non-Europeans.
	• •	• •	Tuesdays	9 a.m.	Europeans and Non-Europeans.
These three ses	ssions	are op	en weekly, a h	ealth vis	itor being in attendance, but are

⁽¹⁾ These three sessions are open weekly, a health visitor being in attendance, but are each attended by the medical officer twice a month only.

⁽²⁾ There is one session only at Retreat on Thursday mornings, open both as an infant consultation and a pre-natal clinic. The medical officer attends twice a month only.

⁽³⁾ For patients of the Jane Waterston Memorial Training School for Midwives.
(4) For patients resident in the Divisional Council area—held once a month.
(5) Ophthalmie session

The next table shows the attendances (classified for race) made at the infant consultations, pre-natal clinics, school clinics and dinners held at the nine centres during the year 1934-35:—

	900 pp access (a.g. alamental access)	Co	Infant nsultation	ons.	Pre-natal Clinics.		Seh Clin		under so	or Children chool age, rsing and t Mothers.
Centre.	Race.	First Attendances.		Total Attend-	Attend	lances.	Attend	lances.	Attendances.	
		Under 1 year.	Over 1 year.	ances.	First.	Total.	First.	Total.	Adults.	Chil- dren.
12, Keerom St., Cape Town.	Eur. Non-Eur. Total.	167 426 593	85 190 275	4,392 6,531 10,923					943 2,086 3,029	2,001 3,798 5,799
Aspeling Street, Cape Town.	Eur. Non-Eur. Total.	40 1,093 1,133	33 621 654	1,243 19,814 21,057	47 1,135 1,182	145 3,989 4,134			121 4,753 4,874	$\begin{array}{c} 227 \\ 14,711 \\ 14,938 \end{array}$
Woodstock	Eur. Non-Eur. Total.	313 378 691	206 247 453	8,158 9,830 17,988	263 296 559	1,186 1,020 2,206	556 399 955	$ \begin{array}{r} 1,774 \\ 539 \\ 2,313 \end{array} $	1,293 2,405 3,698	3,321 7,265 10,586
Maitland	Eur. Non-Eur. Total.	113 447 560	104 232 336	3,253 7,735 10,988	41 276 317	130 1,129 1,259	202 146 348	263 249 512	702 3,434 4,136	1,687 6,464 8,151
Athlone	Eur. Non-Eur. Total.	7 444 451	6 298 304	179 7,593 7,772	338 342	19 1,423 1,442			13 2,838 2,851	20 10,472 10,492
Lansdowne	Eur. Non-Eur. Total	43 112 155	30 48 78	1,754 3,356 5,110					634 3,471 4,105	1,535 12,436 13,971
Claremont	Eur. Non-Eur. Total	92 257 349	69 150 219	2,825 6,711 9,536	43 231 274	157 833 990	381 948 1,329	1,778 2,937 4,715	165 1,585 1,750	397 4,217 4,614
Wynberg	Eur. Non-Eur. Total	99 430 529	69 287 356	2,169 6,557 8,726	38 182 220	132 713 845			59 5,763 5,822	163 10,595 10,758
Retreat	Eur. Non-Eur. Total	38 330 368	34 185 219	1,457 5,819 7,276	31 275 306	141 1,261 1,402	87 111 198	203 248 451	119 2,129 2,248	175 5,076 5,251
Langa	Eur. Non-Eur. Total	1 114 115	$ \begin{array}{c} 1 \\ 40 \\ 41 \end{array} $	11 1,212 1,223	article and the second second					
Total	Eur. Non-Eur. Total	913 4,031 4,944	637 2,298 2,935	25,441 75,158 100,599	467 2,723 3,190	1,910 10,368 12,278	1,226 1,604 2,830	4,018 3,973 7,991	4,049 28,464 32,513	9,526 75,034 84,560

INFANT CONSULTATIONS.

All mothers are invited to bring their babies to the centre for advice as to feeding and medical supervision. They are encouraged to continue attendance periodically until the children reach school age.

The work in this connection aims at being preventive and educational in nature; minor ailments only are dealt with, and cases of illness are referred either to the family doctor, or, in cases of poverty, to the hospitals and dispensaries.

A medical officer is in attendance and certain of the health visitors of the district are present at each session.

Valuable help is given at every centre by voluntary workers, to whom thanks are due.

At the end of the year under review 32 infant consultations were being held weekly. Details in regard to these are given in the table on page 68. During the year 7,879 children were registered as new cases, and the total attendances of children at the infant consultations numbered 100,599. Details are shown in the table set out above.

Of the 7,879 children registered as new cases, 4,944 (913 European and 4,031 non-European) were under one year of age at the time of their first attendance and 2,935 (637 European and 2,298 non-European) were over one year of age at that time.

Of the new cases registered, 343 were of children resident outside the Capetown area: viz., under one year of age, Europeans 28, non-Europeans 174; over one year of age, Europeans 32, non-Europeans 109. The new cases resident within the City (excluding attendance at the Langa centre) were as follows:—

	Eur.	Non- Eur .
Under one year of age	884	3,743
Over one year of age	604	2,149

For the municipal area (not including the native locations) the first attendances of infants under one year of age amounted to 53 per cent. of the registered births (36 per cent. in the case of Europeans and 59 per cent. in the case of non-Europeans). The corresponding percentages for the previous year were 52, 36 and 58.

During the year under review 1,763 attendances (674 Europeans and 1,089 non-Europeans) of nursing mothers and their infants were made for instructional test feeds at the centres (not counted in the above figures). These special investigations form an important feature of the work of the centres. They are undertaken apart from the medical sessions, when there are not distractions for nurse or mother. The test feeds were made at the different centres as follows:—

	Eur.	Non- Eur .
Keerom Street	76	87
Aspeling Street	12	321
Woodstock	142	175
Maitland	93	59
Athlone	24	157
Lansdowne	32	25
Claremont	192	51
Wynberg	58	122
Retreat	45	82
Langa		10
	674	1,089

Attention is called to the advisory sessions for European infants held by the South African Mothercraft Training Centre, Claremont (see page 74). It is also to be noted that infant consultations are held at the Peninsula Maternity Hospital and St. Monica's Home for the babies born in the maternity practice of these institutions.

The number of attendances at the infant consultations is shown in the following table over a period of five years:—

C	entre.		1934-1935	1933-1934	1932-1933	1931-1932	1930-1931
Capetown Aspeling St Woodstock Maitland Athlone Lansdowne Claremont Wynberg Retreat Langa	• •		 10,923 21,057 17,988 10,988 7,772 5,110 9,536 8,726 7,276 1,223	9,468 $22,982$ $18,941$ $11,527$ $8,166$ $4,984$ $11,197$ $8,826$ $8,017$ 642	9,429 18,352 21,462 11,045 10,269 4,468 9,019 9,178 7,868	11,747 553 20,704 9,354 7,271 514 7,568 9,479 6,923	10,878 19,895 7,206 8,403 6,143 7,220 5,048
	Total	s	 100,599	104,750	101,063	74,113	64,702

Dried milk for children who cannot be fed by their mothers is supplied at the centres under the direction of the medical officers and cost prices are charged, but in cases of poverty it is supplied at part-cost or free. Fresh milk is also supplied for older children when ordered by the medical officers. Such medicines as may be ordered are supplied on similar terms.

In the year ended 30th June, 1935, 1,629 new cases were supplied with dried milk and 36,134 lbs. of dried milk were issued. 1,495 pints of tresh milk were also issued. The cost of the dried milk was £2,161 0s. 0d., and of the fresh milk £18 13s. 11d. The amount paid by mothers in respect of dried milk, fresh milk and medicines amounted to £644 10s. 9d.

PRE-NATAL CLINICS.

At the end of the year under review, nine pre-natal clinics per week were held at seven of the centres, in addition to a session that is both an infant consultation and a pre-natal clinic, and a special monthly clinic for Divisional

Council cases. Details are given in the table on page 69.

One of these weekly clinics, held at the Aspeling Street centre, is for expectant mothers who have booked for confinement with the Jane Waterston Memorial Training School for Midwives. This is staffed by the medical officer, matron and students of the Training School and not by the Council's officials. The patients are accorded the same facilities as those attending the ordinary clinics of the Council. The new cases at this weekly clinic numbered 595 (28 European and 567 non-European), and the total attendances 1,984 (77 European and 1,907 non-European). The figures are incorporated in the totals given for the centre in this report.

At the monthly pre-natal clinic held at the Maitland centre for residents outside the municipal area and subsidized by the Cape Divisional Council, up to 30th June, 1935, the new cases numbered 18 (1 European and 17 non-European) and the total attendances 94 (4 European and 90 non-European). These

figures are also incorporated.

Expectant mothers are invited to attend the pre-natal clinics, where they are examined in order to ensure if possible a normal delivery for mother and baby. Enquiries are made as to their arrangements for the confinement, and assistance and advice given where necessary.

In necessitous cases dinners are provided for expectant mothers at the centres.

Anti-venereal treatment is provided at the pre-natal clinics, especially for the

prevention of congenital syphilis. (See page 98.)

Where in-patient treatment is required for diseases associated with pregnancy this is available for non-European women at St. Monica's Home, to which medical officers may refer cases, the Corporation paying an annual subsidy to the Home for this service.

During the year 3,190 expectant mothers were registered as new cases at the pre-natal clinics, and the total attendances numbered 12,278. Details are shown

in the table on page 69.

Of the new cases registered, 97 were of expectant mothers resident outside the Capetown municipal area; viz., 15 European and 82 non-European. The new cases resident within the City numbered 3,093 (European 452, non-European 2,641). That is to say, the number of new cases attending the municipal prenatal clinics amounted to 35 per cent. of the number of registered live births (18 per cent. for Europeans and 42 per cent. for non-Europeans). It is to be noted that pre-natal clinics are also held by the Peninsula Maternity Hospital and St. Monica's Home for their own maternity cases.

The majority of midwives working within the municipal area are co-operating to an increasing extent with the pre-natal clinics. The midwife's work forms an essential link in the chain of maternal and infant welfare, and as she often receives but little remuneration the public service so rendered is especially

to be commended.

DENTAL CLINIC.

A dental clinic is held at the Woodstock centre for pre-school children and expectant and nursing mothers, who are referred for treatment by the medical officers from all the municipal welfare centres.

Three sessions are held weekly, one for Europeans and two for non-Europeans, taken by part-time dentists, and an anæsthetist assists when required.

No charge is made for extractions and fillings, but free dentures are not ordinarily supplied. A voluntary fund is, however, maintained for the supply of dentures at a low cost to women attending the clinic who would otherwise be unable to obtain them. These dentures are fitted by the Council's dentists who conduct the clinic and the amounts paid by the women cover the cost of material and of the services of the dental mechanics.

Below is a table of the work done at the dental clinic during the year 1934-35:—

			E	uropea	n.	Non	-Euroj	pean.		Total.	
			Adults	Children	Total	Adults	Children	Total	Adults	Children	Total
	First		140	454	594	499	718	1,217	639	1,172	1,811
ATTENDANCES.	Other		198	158	356	349	113	462	547	271	818
	Total		338	612	950	848	831	1,679	1,186	1,443	2,629
Extractions (1)	Attendances		170	544	714	661	806	1,467	831	1,350	2,181
Extractions (*)	Teeth	• •	927	2,865	3,792	5,438	4,788	10,226	6,365	7,653	14,018
Fillings (2)	Attendances		9	46	55	6	8	14	15	54	69
Fillings (2)	Teeth		15	92	107	17	14	31	32	106	138
Scalings	Attendances		_	_	_	6	_	6	6		6
Dressings	Attendances	• •	1	1	2	1	_	1	2	1	3
Dressings	Teeth		1	4	5	1	·	1	2	4	6
Attendances for examination			17	20	37	15	16	. 31	32	36	68
Attendances for interview.	• • • •		_	1	1	_	1	1	_	2	2
Persons refused treatment			2		2	9	_	9	11	_	11
Attendances for dentures	• • • •		138	_	138	149	_	149	287	_	287
Attendances for other treatment	nt		1	_	1	1	_	1	2	_	2
Persons supplied with dentures	Full sets		20	_	20	27	_	27	47	_	47
(included above)	Half sets (upper or low	er)	5	_	5	2	_	2	7	_	7

⁽¹⁾ All extractions except at 1 attendance (child 1 tooth) were under general anaesthetic. 2 attendances (European children) were for fillings as well as extractions. 1 attendance (European adult) was for dressings as well as extractions.

PROVISION OF DINNERS.

Dinners are served daily except Saturdays and Sundays at all the centres to indigent children and nursing and expectant mothers for whom they are ordered by the medical officers. Malnutrition amongst young children is very prevalent and these dinners are of great value in ensuring one good meal a day. The recipients of a course of dinners have shown a marked improvement in their physical condition and general health.

In the year under review the number of dinners given amounted to 117,073. Details are given in the table on page 69.

In the calendar year 1935 the cost amounted to 2.7d. per dinner. This figure includes the cost of food, extra staff engaged on account of the dinners, and fuel at four centres. It does not include current for the electric stoves at

^{(2) 2} attendances (Non-European adults) were for scalings as well as fillings.

five of the centres, nor the wages of the ordinary members of the staff who may assist in connection with the dinners. Gifts in kind have been received and the services of the mothers themselves are utilized as much as possible.

MASSAGE AND EXERCISE CLINICS.

Weekly classes for breathing and remedial exercises are held at the Woodstock and Aspeling Street centres. During the year under review, 51 sessions (for both races) were held at the former, where the new cases numbered 47 and the total attendances 307, and 46 sessions (for non-Europeans) at the latter, where the new cases numbered 30, and the total attendances 381. These figures are not included in the statistics given earlier in this report.

Mrs. Adamson and Miss Haggard, who are qualified masseuses, undertake the work of these two clinics on a voluntary basis, and their services are much appreciated.

SCHOOL CLINICS.

By arrangement with the Provincial Administration, school clinics are held during school terms at the Council's welfare centres. Until the end of 1934, in addition to a weekly ophthalmic clinic for both races held at the Woodstock centre, there were also held one (general) clinic a week at Woodstock for European children and two a week at the Claremont centre, one for European children and one for non-Europeans.

From the beginning of 1935 the scheme was modified, one general school-clinic session a week being held at each of the Woodstock, Maitland, Claremont and Retreat Centres. The time is divided between European and non-European children. No change was made in the ophthalmic clinic. At each session a medical officer is in attendance and one or more health visitors, assisted by voluntary helpers.

The cost of the clinics, including the salary of one health visitor, is repaid to the City Council by the Provincial Administration. No charge is made for the use of the premises. The health visitor follows up cases in their own homes.

The attendances have not been confined to the children from the Capetown municipal area (see table below).

Spectacles have been supplied by a firm of opticians at cheap prices to children for whom they have been ordered by the ophthalmologist. To assist parents, payment by instalments has been arranged and in cases of indigency the price has been reduced or remitted.

Children needing other specialist attention, particularly nose, ear and throat cases, have been dealt with by reference to the hospital out-patient departments. Cases needing dental treatment are referred to the dental clinic of the Capetown Free Dispensary and to private dentists.

Admission to convalescent homes has been obtained for a number of children suffering from undernourishment and debility. A large number of children attending the clinics are found to be suffering from the effects of underfeeding.

The work done during the year ended 30th June, 1935, is shown in the table on page 69, and is further analysed in the following figures:—

	Gene	eral School C	linie.	Opi	Ophthalmic Clinic.				
	European.	Non- European.	Total.	European.	Non- European.	Total.			
Number of new cases:— Capetown Residents Non-Capetown Residents Total attendances Number of Clinics held Children fitted with spectacles:—	854 141 3,609	1,275 91 3,646	2,129 232 7,255 135	192 39 409	190 48 327	382 87 736 39			
Full-paying Part-paying Free		:		50 28 50	. 51 35 55	101 63 105			

SOUTH AFRICAN MOTHERCRAFT TRAINING CENTRE.

The Mothercraft Training Centre, Bowwood Road, Claremont, holds advisory sessions for European infants at the centre (Bowwood Road, Claremont), at the Town Hall, Sea Point, at the Library, Camps Bay, at Mossop Hall, Roseberry Road, Mowbray, and at Pinelands outside the Municipality. At these sessions the mothers are interviewed by a trained mothercraft nurse and advised as to the feeding, etc., of the infant. This voluntary work is a useful addition to that of the Council's centres, because it reaches a different class of European mother and serves certain areas where there is no Council centre. The following statement of work done during the year ended 30th June, 1935, has been kindly supplied by the Matron, Miss A. Mitchell.

Voluntary Centre.	No. of Sessions in the year.	No. of new cases (infants).	Total attendances (infants).	Total attendances (toddlers)		
Bowwood Road, Claremont Sea Point	$149 \\ 50 \\ 23 \\ 12$	543 95 16 23	3,176 1,551 287 216	1,047 214 37 53		

Expectant mothers are also given individual advisory interviews by a mother-craft nurse at the Mothercraft Training Centre. 29 expectant mothers received instruction during the year.

The Mothercraft Training Centre has wards for European infants suffering from dietetic disorders who need in-patient treatment, and also for nursing mothers needing in-patient treatment as such. During the year 1934-35, out of the 185 infants admitted 121 were Capetown residents, their average length of stay being 20.4 days. Out of the 77 nursing mothers admitted 48 were Capetown residents, their average length of stay being 10.1 days. Of the total of 262 patients, including non-Capetown residents, 154 paid full fees, 61 paid reduced fees and 47 were non-paying cases.

The centre is a training school for mothercraft (Athlone) and nursery (Good Hope) nurses. During the year 21 registered nurses or midwives took the former certificate and 8 young women, not trained nurses, the latter.

DAY NURSERIES.

The following crèches, or day nurseries, are maintained in Capetown:

- (1) By the Capetown Board of Aid at the European shelter, 7-11 Wale Street, Capetown, (see page 12). This day nursery is for European children. It was opened on 4th February, 1935. Its full capacity is 50, but until the end of the year under report it was only partially full.
- (2) By the A.C.V.V. at the Social Centre and European Working Girls' Home, 41 Salt River Road, Salt River. This day nursery is for European children. It has been running since May, 1933. Its capacity is 30, and it is usually quite full.
- (3) By the Vroue Sending Bond at the Training School for Coloured Social Workers, 109 Harrington Street, Capetown. This day nursery is for non-European children. It has been running since September, 1932. Its capacity is 20 and it is usually quite full.

In November, 1934, the Medical Officer of Health submitted a report to the responsible Committee of the Council in favour of the establishment of nursery schools by the Council.

SECTION V.—GENERAL ADMINISTRATION.

STAFF.

Medical staff.—Dr. A. J. Wilson was re-appointed as Assistant Medical Officer for poor relief as on 1st August, 1934, and was succeeded on 1st February, 1935, by Dr. M. Maister, who resigned on 19th March, 1935, and was succeeded by Dr. R. E. Meaker.

The positions of Senior and Junior House Physicians at the City Hospital for Infectious Diseases were held respectively by Dr. Elsie Cloete and Dr. Margaret A. Sutherland from 1st August, 1934, to 31st January, 1935, and by Dr. Margaret A. Sutherland and Dr. Pearl Glatt from 1st February to 31st July, 1935.

Health Visitors.—Mrs. B. Gardiner and Miss C. Keenan entered the service as health visitors on 5th March and 15th May, 1935, respectively.

HEALTH INSPECTORS AND OTHER SANITARY STAFF.

On 30th June, 1935, the staff of health inspectors included the Chief Health Inspector, the Assistant to the Chief Health Inspector, 5 Divisional Health Inspectors, 18 District Health Inspectors, 2 Health Inspectors for dairies, 2 Rodent Inspectors and 6 Assistant Health Inspectors.

In addition to the foregoing inspectorial staff, there is a staff of rateatchers, which, at the end of the year under report, consisted of 12 men and 3 youths; 2 labourers who assist the health inspectors in drain testing; and a staff of attendants of both sexes at the public sanitary conveniences, who are referred to on page 93.

A Meat Inspector, who is responsible for the inspection of meat imported into the Municipality and holds the Certificates of the Royal Sanitary Institute for Sanitary Inspectors and for Meat and Food Inspectors, is also attached to the Department.

Besides the staff set out above there are 2 Removal Officers, 2 chauffeurs, and 1 labourer, for the removal of cases of infectious disease to hospital and the subsequent disinfection of premises and articles, and 1 mechanic and 1 labourer in charge of the disinfection plant. The work done by this staff is referred to on page 36.

There are also 6 chauffeurs for the five departmental cars and the departmental delivery van, and 1 spare chauffeur who is employed at the disinfecting station when not required as a driver.

The inspections made by the male health inspectors (other than the meat inspector and rodent inspectors) during the year under review are indicated by the following figures:—

Inspections made:

Public markets						 3,022
Butchers' shops						 13,618
Dealers and gener	ral dea	alers'	shops	(food)		 14,881
Dealers and genera	al deale	ers' sh	ops (ne	o food)		 2,611
Fish and poultry	shops					 2,599
Bakers' shops (wit	hout b	akeho	uses)			 467
Bakehouses						 1,156
Milk shops (purve	yors of	miłk)				 5,099
Ice cream purveyo	rs and	manu	facture	ers		 1,091
Tea shops						 1,772
Cafés						 1,696
Restaurants				• • •	• • •	 1,632
Eating houses						 1,077
Residential hotels	and boa	arding	houses	S		 1,374

cerated water manufac	turers					170
Other places where foo	d is r	nanufa	ctured			614
Hawkers' premises						2,698
Hawkers' carts		• • •				721
Butchers' carts and ca	rriers					874
Iilk-delivery carts		• • •				4,997
Fish carts			• • •			105
Bakers' carts		• • •		• • •		107
ce cream carts			• • •			112
Cents		• • •				128
sideshows			• • •			21
Cheatres and bioscopes	• • •					529
Billiard saloons						111
Common lodging houses						228
Cenement houses			• • •			14,415
Other house inspections						47,157
Hairdressers			• • •			1,421
Laundries			• • •	* * *		422
lattress makers and up	pholste	rers	•••			375
Other factories and wor	ckplace	s	• • •			3,603
Courts, lanes and alleys			• • •			4,743
pen land	• • •					1,418
iggeries						105
Horse stables		• • •	• • •	• • •		7,480
Dairy stables		• • •	• • •		• • •	3,276
Cattle dealers' premises	• • •		• • •	• • •	• • •	14 3
visits made in connection	on with	n infec	tious d	isease		2,080
Tackney carriages						21
tanding water, catchpi	ts, etc	. re m	osquito	es		525
Sites or premises re dej	posited	plans				146
Public sanitary convent	iences		• • •			3,659
Refuse tips						687
Vashhouses						221
Other visits	• • •		• • •		• • •	3,171
						158,578

Visits to premises where action was taken in conne	ction	
with rodent infestation		138
Visits at which premises were disinfected		3
Drain tests carried out		737
Visits where enquiries were made re outworkers		66

The notices served by health inspectors during the year under review are enumerated below:—

Proceedings begun by:						
Verbal notices		• • •			• • •	2,566
Written request notices	• • •			• • •	• • •	77
Formal written notices	* * *	• • •	• • •	• • •	• • •	5,890
Total proceeding	ıgs be	gun	•••	•••		8,533
Written notices following ve	erbal 1	notices		•••		734
Total notices served:						
Verbal notices				• • •		2,566
Request notices						79
Formal notices						6,773
Final notices						1,927
$egin{array}{cccc} ext{Total} & \dots \end{array}$	• • •	• • •	• • •			11,345
The number of items included	d in th	ie 8,535	3 notic	es wer	e as fo	
Ward 1. Sea Point		ne 8,535 	3 notic	es wer	e as fo	946
Ward 1. Sea Point Ward 2. Harbour					e as fo	946 603
Ward 1. Sea Point Ward 2. Harbour Ward 3. West Central		• • •		• • •		946 603 546
Ward 1. Sea Point Ward 2. Harbour Ward 3. West Central Ward 4. Kloof						946 603 546 1,043
Ward 1. Sea Point Ward 2. Harbour Ward 3. West Central Ward 4. Kloof Ward 5. Park					 , ,	946 603 546 1,043 729
Ward 1. Sea Point Ward 2. Harbour Ward 3. West Central Ward 4. Kloof Ward 5. Park Ward 6. East Central						946 603 546 1,043 729 3,075
Ward 1. Sea Point Ward 2. Harbour Ward 3. West Central Ward 4. Kloof Ward 5. Park Ward 6. East Central Ward 7. Castle						946 603 546 1,043 729 3,075 2,735
Ward 1. Sea Point Ward 2. Harbour Ward 3. West Central Ward 4. Kloof Ward 5. Park Ward 6. East Central Ward 7. Castle Ward 8. Woodstock						946 603 546 1,043 729 3,075 2,735 1,691
Ward 1. Sea Point Ward 2. Harbour Ward 3. West Central Ward 4. Kloof Ward 5. Park Ward 6. East Central Ward 7. Castle Ward 8. Woodstock Ward 9. Salt River						946 603 546 1,043 729 3,075 2,735 1,691 1,779
Ward 1. Sea Point Ward 2. Harbour Ward 3. West Central Ward 4. Kloof Ward 5. Park Ward 6. East Central Ward 7. Castle Ward 8. Woodstock Ward 9. Salt River Ward 10. Mowbray						946 603 546 1,043 729 3,075 2,735 1,691 1,779 1,330
Ward 1. Sea Point Ward 2. Harbour Ward 3. West Central Ward 4. Kloof Ward 5. Park Ward 6. East Central Ward 7. Castle Ward 8. Woodstock Ward 9. Salt River Ward 10. Mowbray Ward 11. Maitland						946 603 546 1,043 729 3,075 2,735 1,691 1,779 1,330 780
Ward 1. Sea Point Ward 2. Harbour Ward 3. West Central Ward 4. Kloof Ward 5. Park Ward 6. East Central Ward 7. Castle Ward 8. Woodstock Ward 9. Salt River Ward 10. Mowbray Ward 11. Maitland Ward 12. Rondebosch						946 603 546 1,043 729 3,075 2,735 1,691 1,779 1,330 780 749
Ward 1. Sea Point Ward 2. Harbour Ward 3. West Central Ward 4. Kloof Ward 5. Park Ward 6. East Central Ward 7. Castle Ward 8. Woodstock Ward 9. Salt River Ward 10. Mowbray Ward 11. Maitland Ward 12. Rondebosch Ward 13. Claremont						946 603 546 1,043 729 3,075 2,735 1,691 1,779 1,330 780 749 2,169
Ward 1. Sea Point Ward 2. Harbour Ward 3. West Central Ward 4. Kloof Ward 5. Park Ward 6. East Central Ward 7. Castle Ward 8. Woodstock Ward 9. Salt River Ward 10. Mowbray Ward 11. Maitland Ward 12. Rondebosch Ward 13. Claremont Ward 14. Kalk Bay						946 603 546 1,043 729 3,075 2,735 1,691 1,779 1,330 780 749 2,169 495
Ward 1. Sea Point Ward 2. Harbour Ward 3. West Central Ward 4. Kloof Ward 5. Park Ward 6. East Central Ward 7. Castle Ward 8. Woodstock Ward 9. Salt River Ward 10. Mowbray Ward 11. Maitland Ward 12. Rondebosch Ward 13. Claremont						946 603 546 1,043 729 3,075 2,735 1,691 1,779 1,330 780 749 2,169

Other defects were dealt with by the inspectors by reports for transmission to the City Engineer and other departments of the Corporation as follows:—

Stopped drains	 	 	988
T) (1' 1 C11'			0==
Unauthorised structures	 	 	106
Undrained premises	 	 	4
Structural defects to premises	 	 	34
Other defects	 	 	81

SLUMS ACT.

The Slums Act No. 53 of 1934 became operative on 25th June, 1934. In July, 1934, the City Council appointed a Committee and authorized it to administer the Act in terms of Section 37 (2). Up to 30th June, 1935, 157 premises were reported by the Medical Officer of Health under Section 1 (2).

These premises are set out in the following table, which also shows whether the premises were declared to be slums; and if so the date of such declaration, the number of lettings and occupants in the premises, and the later steps taken:—

SLUMS ACT, 1934: PREMISES REPORTED BY MEDICAL OFFICER OF HEALTH UNDER SECTION 1 (2).

A = Order to remove nuisance, section 5 (1) (a).

B = Order to demolish, section 5 (1) (b).

C = Sanction to acquire granted by Minister of Public Health, section 5 (1) (c), and section 17.

D = Rescission of slum declaration, section 15.

Date of Dechards D	Date of	Premises reported by M.O.H. under	Premis	es declared slu	ıms.	
Sept. 28	M.O.II.'s	Section 1 (2).	Date of Declaration.	No. of Lettings.		
1034.	Sept. 28 Nov. 3 " "	Woodstock 115, Castle St., Capetown 117/119, Castle St., Capetown 63/69, Roeland St., Capetown 77, " 170/174, Newmarket St., Capetown	Oct. 30 Nov. 29 "	10 13 24 9	27 44 82 47	A. Nov. 7. D. Oct. 31. B. ,, D. Apl. 30. B. Dec. 5. D. ,, A. ,, D. Jul. 30. B. ,, D. Aug. 29. 1936. A. ,, D. Apl. 30.
Total premises declared slums in Jerry St. Area: 27 106 330	1934. Dec. 3 ,,	2, Jerry St., Capetown 4, " " " 6/8, " " 10, " " 12, " " 14, " " 1, " " 3, " " 5, " " " 7, " " " 11, " " 31/33, Mechau St., Capetown 37, " " " 39, " " " 23, Chiappini St., Capetown 25, " " 27, " " 29, " " 29, " " 29, " " 34a, Prestwich St., Capetown 38, " " " 40, " " " 42, " " " 24, Mechau Lane, Capetown 4, " " " 2, Mechau Lane, Capetown 4, " " "	Jan. 31 Jan. 31 Jan. 31 Jan. 31	$egin{array}{c} 3 \\ 13 \\ 1 \\ 3 \\ 2 \\ 5 \\ 5 \\ 5 \\ 6 \\ 5 \\ 5 \\ 7 \\ 6 \\ 5 \\ 5 \\ 1 \\ 3 \\ 3 \\ 2 \\ 4 \\ 5 \\ 4 \\ 3 \\ 4 \\ 2 \\ 1 \\ \end{bmatrix}$	5 32 1 10 6 9 14 24 —————————————————————————————————	1935. C. Oct. 28. "" "" "" "" "" "" "" "" "" "" "" "" "
Dec. 3			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	106	339	
1935. Feb. 1 22, Constitution St., Capetown Mar. 11 3 8 C. Sept. 4. " 24, " " " 3 8 8 7 7 26, " " 26, " " 24 7	1934. Dec. 3 " " " " " " ".	2, Assurance Lane, Capctown 4, " " 6, " " 10, " " 5, " " 79/81, Lower Main Rd., Observatory 83/85, " " 91/93, " "	23 · · · · · · · · · · · · · · · · · · ·	1 1 1 1 2 2 7 8 6	6 10 6 9 6 11 24 27 28 6	B. Feb. 11 D. Dec. 2. """" """ """ D. Sept. 26. A. "" A. "" """ """ """ """ """ """
1935. Mar. 2 37a, Regent Street, Woodstock — — Use as dwelling dis-	1935. Feb. 1 "	22, Constitution St., Capetown 24, " " " 26, " " " 28, " " " 30, " " " 32, " " " 34, " " 36, " " " 36a/38, " " 2, Drury Lane, Capetown 4, " " 5/7, Bloemhof St., Capetown 9/11, " " 13, " " 17, " " 19/21, " " 19/21, " " 19/21, " " 23, " " 1, Wells Square, Capetown 3, " " 5, " " 23/25, " " King's Buildings, Wells Square, C.T	1935. Mar. 11 """""""""""""""""""""""""""""""	3 3 2 1 2 1 2 3 6 3 2 4 1 7 3 1 ———————————————————————————————	8 4 7 10 6 5 13 10 9 10 5 28 8 4 8 8	1935. C. Sept. 4. "" "" "" "" "" Acquired by Council. C. Sept. 4, 1935. "" "" "" Acquisition by Council negotiated. C. June 7, 1935.
	1935.		_		_	Use as dwelling dis-

Date of	f	Premises reported by M.O.H. u	ınder	Premises declared slums.			
M.O.H.' report.		Section 1 (2).		Date of Declaration.	No. of Lettings.	No. of Occupants.	b.
1935. Mar. 29		14, Rose Street, Capetown		1935. April 30	5	20	1935. C. Oet. 12.
"		16, " "		April 30	4	24	"
»		18, ", ", 20, ", ",)) · ·	4	12 14	3¢ ¢9
"		22, " " "		27	3	$\frac{10}{21}$	22
>>		24, , , , ,	::	"	4	19	**
"	• •	28, ", ",		,,	$\frac{3}{2}$	$\begin{array}{c} 10 \\ 12 \end{array}$	"
?? ??		137, Castle Street, Capetown 139, " "		?? · ·	1	6	22
22	• •	141, ", ", 143, ", ",		June 27	4	9	C. Nov. 21.
"		51, Chiappini Street, Capetown	• •	April 30	5	14	C. Oct. 12.
"		53, 128, Hout Street, Capetown		* *	4	13	"
» »		130/132, , ,		" · · ·	į	1	.,
?? ??		134, ", ", 136, ", ",		June 27	5 4	14 11	C. Nov. 21.
"	• •	138/140, " "	• •	April 30	$\frac{2}{2}$	8 11	C. Oct. 12. C. Nov. 21.
»	• •	2, Castle Lane, Capetown	::	June 27		9	0. NOV. 21. "
"	• •	12, , , ,	• •	,,	1	7 7	>>
"		1, ,, ,,		April 30	i	11	C. Oct. 12.
**	• •	9, ,, ,,	• • •	"	4 4	15 10))))
"		13, " "	• •	27 · · ·	5	16	
"	• •	1, Brink Lane, Capetown	• •	June 27	$\frac{2}{2}$	$\frac{3}{7}$	C. Nov. 21.
"		5, , , ,	• •)) · ·	1	8	"
"	• •	7, , , , ,	• •	» · ·	$\frac{3}{2}$	5 6	"
otal prem		declared slums in Castle Lane are		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	94	346	
1935. April 25		129/131, Hout Street and 30,	Rose	1935.			1935.
April 25	• •	Street, Capetown		May 28	4	14	C. Sept. 7.
12	• •	32, Rose Street, Capetown 34, " "	• •	"	4	14 11	**
"		36, , , ,	• •)) · ·	2	11	27
"	• •	38, " " "	• •	,,	2 4 2 2 2 2 3	19 11	"
"	• •	42.	• •	22 * *	$\frac{1}{2}$	16	**
22	• •	136, Shortmarket Street, Capetow 138, " "	vn	"	3	10 7))))
99 99		140, ,, ,,		,,	4	15	>>
"	• •	142, " " 144, " "	• •	22 • •	$\frac{1}{2}$	7 19	22
"		59, Chiappini Street, Capctown	• •	Morr 00	8	42	,,
»	• •	133, Hout Street, Capetown	• •	, may 28	3	9	;; ;;
"	• •	135, , , ,		>> • •	3	11 15	**
"	• •	137, " " "	• •	,,	4	14	"
>>	• •	141, ,, ,, 143, ,, ,,	• •	,,	4 4	11	22
"		145, " "		,,	4	12	"
"	• •	14, Berg Lane, Capetown			1	3	**
"		18, " "		Mar. 20	_	-	"
"	• •	20, " "	• •	May 28	4	9 15	21
"	• •	$\frac{24}{96}$, , ,		27	3 3	12 12	**
rotal prem	igog	declared slums in Berg Lane area	No. 1:	25.	83	330	,,
1935				1935.			1936.
May 20	• •	109/111, Hout Street, Capctow 113, "		June 27	4	13	C. Mar. 9.
"	• •	115, " "		June 27	8	21	22
22	• •	125/127, ", ", 37, Rose Street, Capetown	• •	"	9	32	**
"	• •	39, Rose Street and 132, Shortr					
		Street, Capetown 1, Berg Lane, Capetown		June 27	3	9	**
"		7, ,,		,,	1	5	**
"		9, ", ",	• •	June 27	3	11	"
"		$\frac{4}{a}$,		,,	2 2	12	19
"		6, ,	• •	.,	1	10	51
"	• •	10, , , ,		,,	$\frac{1}{2}$	9 7	•,
"	· ·	declared slums in Borg Tana area	No. 2 :	"	36	138	11
Total pren 1935.	HISCS	declared slums in Berg Lane area	NO. 2:	1935.	- 30	198	1935.
June 27		48, Rose Street, Capctown		July 30	7	15	C. Oct. 11.
"		50, 188, Longmarket Street, Capeto	wn	22	8	25 44	49
22		100/109		22 . * *	4	14	
"	• •	63/65, Chiappini Street, Capetow 89, Shortmarket Street, Capetov	n vn	11	9 4	24 13	41
))))		91,	v 11	,,	5	10	27
**	• •	93,,		1,	5 6	13 16	44
10		97,		,,	6 2	14	"
**		99, ,		1,	1 4	5	
11	• •	declared slums in Shortmarket Str			66	193	

Appeals were made by the owners to the Minister of Public Health against the Council's slum declarations in respect of the following 24 premises included in the foregoing list:—

36a/38 Constitution Street, Capetown.

23/25 Wells Square, Capetown.

2 and 4 Drury Lane, Capetown. 141 and 143 Castle Street, Capetown.

134 and 136 Hout Street, Capetown.

2, 10, 12 and 14 Castle Lane, Capetown. 1, 3, 5, 7 and 9 Brink Lane, Capetown.

2, 4, 6, 8, 10, 12 and 7 Berg Lane, Capetown.

In each case the appeal was dismissed.

The majority of the premises shown in the foregoing table as declared slums were situated in areas which the Council decided to deal with under Chapter 3 of the Act with a view to acquisition, demolition and rebuilding. These areas are enumerated in the following table, which shows the premises comprised therein and the number of lettings and occupants in the premises.

Name of Area.	No. of premises declared slums.	No. of other premises comprising dwellings.	No. of lettings (dwellings).	No. of occupants.	Total number of premises.
Jerry Street Area Wells Square Area Constitution Street, Mc- Kenzie Street Area Castle Lane Area Berg Lane Area, No. 1 Berg Lane Area, No. 2 Shortmarket Street, Area "A"	27 18 ———————————————————————————————————	28 22 27 34 29 21	107 106 110 102 94 57	341 294 395 366 371 226	29 26 31 38 32 24 19

CLOSURE OF STABLE PREMISES.

The Municipal Regulations empower the Council to prohibit the use for the keeping of animals of any stable, cowshed, pigstye, kraal, etc., which in its opinion is "unfit, undesirable or objectionable by reason of its locality, construction or manner of use." The Council may also restrict the number or kind of animals to be kept at any such premises. During the year ended 30th June, 1935, the Council prohibited the further use for the keeping of animals of 18 stable premises. These were all stables for horses, mules or donkeys: at one of them cattle were also kept.

Previously, since 1929 the Council had prohibited the use of 39 stable premises.

ANTI-RODENT OPERATIONS.

The plague position in the country during the year under review has con-

tinned to call for measures against rodents.

The present prevalence of human plague in South Africa has continued since 1923. In 1923-24 there were 372 cases in the Union, and in succeeding years, in order, 112, 71, 75, 39, 65, 145, 71, 22, 31, and 39. In the year under report (1934-35) the Union Health Department reports enormous plague mortality amongst veld rodents—probably the worst plague epizootic amongst them during recent times—and an increased incidence of the disease amongst human beings, numbering 290 cases (26 European and 264 non-European), of which 197 were in the Orange Free State, 59 in the Cape Province and 34 in the Transvaal. The human deaths numbered 184. The cases in the Cape Province were at Glen Grey, Herschel, Aliwal North and Williston.

The cause of the human cases in this country is the existence of the disease in the veld rodents and other wild animals, especially the gerbilles. Infection of the

veld rodents has been found to exist over a vast area in the Union. Fortunately, the infection has not extended to rats in towns, and in recent years no town has been involved in a serious outbreak of the disease. There have been no human or rodent cases of plague in Capetown or in the neighbouring part of the country. The area of plague infection has come gradually nearer to Capetown. In 1923-24 it was still at a great distance. In 1924-25 there were human cases at De Aar, five hundred miles from Capetown. In 1926-27 there was an outbreak in an area in the Cape Province, including Kenhardt, Williston and Calvinia, and extending to within two hundred miles from Capetown. In 1927-28 the infection spread amongst rodents in the north-western Cape districts over an area involving part of the Ceres basin, about seventy miles from Capetown. The Van Rhynsdorp district near the Olifants River towards its mouth was involved in 1932.

In June, 1935, the City Council's rodent staff consisted of 2 rodent inspectors and a rateatching staff of 12 men and 3 youths. Besides certain work for combating mosquito prevalence the activities of this staff are divided between the suppression of the rats in the town and of the veld rodents in a belt of country within the Municipality extending from Table Bay, Salt River Mouth, to False Bay, between Sand Vlei and Zeekoe Vlei. Against the veld rodents (gerbilles) reliance has been placed chiefly on the use of wheat poisoned with strychnine, which has given satisfactory results. Cyanogas is also used.

In town attention has been given chiefly to the rat-proofing of premises such as forage stores, food shops and other places which attract, harbour and nourish rats, and the destruction of rats in infected premises. In the granting of trading licences for grocers' shops and the like rat-proofing has been insisted on. Many wooden floors in such premises have been replaced by concrete. Rat-proofing has been required in connection with the erection of new shops and stores or alterations, additions, etc., in accordance with the Union Government Regulations.

The rodent staff devote part of their time also to anti-mosquito work.

The work done during the year under review is indicated by the following figures:—

Inspections by Roder	nt Inspe	ctors:				
$Re ext{ rodents} ext{}$					5,276	
Re mosquitoes					4,824	
						10,100
Inspections re rodents						138
Inspections re mosqu						525
Visits made to land	is and	premi	ses by	rat-		
catchers:					91 690	
$Re ext{ rodents} \dots$	• • •	• • •	• • •		31,638	
Re mosquitoes	• • •	• • •	• • •	• • •	12,336	49.074
Number of notices	gorvad	hw 1	Rodont	In-		43,974
spectors:	serveu	Бу 1	touent	T11-		
Verbal notices					116	
Written notices				• • •	201	
Wilten hotices	• • •		• • •	• • •	~01	317
Number of rodents	caught	and	destroy	red:		911
Brown rats		• • •			3,257	
Black rats				•••	3,597	
C 1.111					543	
Gerbines	•••		• • •	•••	0.10	7,397
						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

The figures given above as to rodents destroyed include only the number of animals whose dead bodies were actually recovered. There is no reason to doubt that many more were destroyed by the methods employed.

The above figures do not include certain inspections made and notices served by the district health inspectors in connection with rodents.

MOSQUITOES.

One of the rodent inspectors specialises also in anti-mosquito work. He investigates local prevalences of mosquitoes discovered through complaints or otherwise, and controls permanent anti-mosquito measures in the Black River Valley. Two of the rateatching staff under his supervision devote the whole of their time to oil-spraying of waters where mosquitoes are bred. The number of inspections, etc., is shown under the previous heading.

The chief prevalence of mosquitoes is in those parts of the southern suburbs which are within a mile or two of the Black River and the Sewage Disposal Works at Athlone. The mosquitoes are almost exclusively Culex pipiens. Anopheles and Aëdes are not found.

The effluent canal from the disposal works joins the Vygekraal tributary of the Black River where it crosses the Cape Flats railway line, and the tributary joins the river a few hundred yards lower at a point a short distance above the pumping station. Above the junction there is practically no mosquito breeding in the river or its tributaries. There is hardly any breeding also in the other streams in the municipal area.

The river valley is low-lying and parts of it become flooded in the wet season owing to the accumulation of storm water and overflows through defects in the embankment of the river. Some of these collections of water remain throughout the year. If the river and vleis remain untreated mosquito larvae breed in large numbers. In the past there has been considerable mosquito nuisance in the sur-

rounding neighbourhood throughout the summer.

Anti-mosquito operations were therefore instituted in the part of the river valley which lies above the Valkenberg Hospital grounds and belongs chiefly to the City Council. The ordinary anti-larval procedure, viz., the weekly application of oil to the vleis and streams, did not give the successful results that were to be expected if the only source of infestation were ova deposited locally by mosquitoes. The explanation of this has been found in the fact that well-grown larvae and pupae are constantly being carried down by the effluent from the irrigated lands on the sewage disposal works. The ova are laid in the flooded fields, and the resulting larvae and pupae are carried down into the river valley, where the insects develop. A weekly oiling is not sufficient to prevent this, because the oil disappears a few hours after spraying, and then fresh larvae can be found passing down the river unharmed.

To meet this difficulty a system of daily application of oil to the river has been in operation since October, 1934. A series of five scum-boards have been fixed along the Black River above Valkenberg, and every day a portion of each of the five river sections above the boards is sprayed with oil. The oil film usually remains for several hours at the boards. About four gallons of oil a day are used. In the effluent canal near its outfall a drip-can has been fixed, which ensures a continuous application of oil and a permanent local film on the water.

This distributes about two gallons of oil in twenty-four hours.

This system has been completely successful in killing all larvae and pupae drifting down the river. If it is discontinued heavy infestation of the edges of the stream at once occurs. It is supplemented by weekly spraying of the vleis lying in the valley above the Valkenberg boundary, which prevents breeding there. The result has been a substantial decrease in the mosquito nuisance in the neigh-

bouring parts of Mowbray, Rondebosch and Pinelands.

A severe recrudescence of the nuisance has, however, taken place in the two autumn seasons following. It has come on with the early summer rains before the weather has become cold. It is only in certain states of the weather that the nuisance has been severe, especially when there is no wind; and the trouble is intermittent, lasting only a day or so at a time. The area affected is somewhat widespread, including Mowbray, Rondebosch, Newlands, Maitland, N'dabeni, Pinelands, Langa, Bokmakirie, Athlone and Lansdowne. A careful search for local breeding is made, but no source can be traced except the disposal works, where breeding occurs on a great scale in the irrigated lands. The mosquitoes tend to harbour about the overgrown banks of streams, where clouds of them may sometimes be observed, but there is practically no breeding there. It is concluded that the distance travelled by the mosquitoes is greatly increased when the ground and vegetation are moist with rain and the temperature is still not too low. Earlier in the summer this tendency is checked by drought and later in the season by the low temperature.

The Black River valley below the junction of the Council's land and the Valkenberg estate belonging to the Union Government, does not receive similar attention, and excessive mosquito breeding occurs from time to time in the swamps and vleis adjoining the river at Valkenberg and Vaarsche's Drift. It also occurs near the Liesbeek River at Valkenberg and Liesbeek Park. Winter mosquito

nuisance occurs in the neighbouring districts as a result.

Mosquito prevalence is liable to occur in any part of the Municipality through breeding taking place in local collections of water. It is by no means

confined to the summer. When complaints of this nature are received it is usually possible to locate the source of the trouble and put an end to it.

Trapped street catch-pits are apt to cause trouble, and their treatment with larvicide is undertaken by the City Engineer's Department.

CAMPING.

Camping on private sites within the municipal area has been kept under observation by the health inspectors. During the year 1934-35 nine applications for the erection of tents, etc., were received, of which eight were approved and one cancelled. In addition four applications were received for the use of caravans for camping purposes, of which three were approved and one refused.

FOOD, DRUGS AND DISINFECTANTS ACT, 1929.

In terms of Government Notice No. 1572 of 2nd December, 1932, the Minister of Public Health added the Municipality of the City of Capetown to the list of local authorities empowered under Government Notice No. 666 of 11th April, 1930, to administer the Food, Drugs and Disinfectants Act in respect of (a) perishable articles mentioned or defined in the Regulations under the Act and (b) flour, meal, bread and any other article of food not packed or sold in a sealed package; and fixed the number of samples to be examined for the Municipality in the Government Chemical Laboratory free of charge at 549.

Sampling duty is undertaken by the five divisional health inspectors. The following is a record of the samples taken during the year under review:—

Samples taken under Food, Drugs and Disinfectants Act. 1st July, 1934—30th June, 1935.

1ST JULY, 1934—30TH JUNE, 1935.								
			1	Not genuin	te.			
Nature of sample.	No. of samples.	No action taken.	Letter sent.	Warning notice sent.	Summons applied for.	Total.	Genuine.	
Milk Cream Ice cream Butter Cream cheese Cheese Cheese Skimmed milk cheese Dried milk Margarine Minced meat Polony Sausage Dripping Lard Flour Rice Oats Boer meal Sugar Pepper Coffee Mixed coffee Chicory Tea Cocoa Jam	457 1 12 3 3 2 1 1 2 3 4 24 5 8 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 1 2 1 1 2 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1	5	23 1 - - - - - - - - - - - - -	31 7 — — 4 — — — — — —	41 -1 -3 -1 	100 -9 -3	$egin{array}{cccccccccccccccccccccccccccccccccccc$	
Honey	548	5	29	42	51	127	$\frac{1}{421}$	

Of the 51 applications for summonses in respect of samples taken during the year ended 30th June, 1935, 7 were withdrawn and 3 were not heard until after the end of that year. 13 cases in respect of samples taken in the previous period were also heard in the year under report. 54 cases were therefore heard during the year, and are included in the list of prosecutions at page 92.

The results of analysis of the samples of milk taken were as follows:—

Percentage of milk fat.	No. of Samples.	Percentage of milk-solids-not-fat.	No. of Samples.
1.0-1.4		6.0 - 6.4	1
1.5—1.9	3	6.5—6.9	4
2.0-2.4	9	7.0—7.4	2
2.5-2.9	23	7.5—7.9	9
3.0-3.4	143	8.0—8.4	63
3.5-3.9	154	8.5—8.9	260
4.0-4.4	82	9.0 - 9.4	113
4.5-4.9	20	9.5-9.9	5
5.0-5.4	7		
5.5—5.9	4		
6.0 - 6.4	4		
6.5—6.9	2		
7.0—7.4	1		
9.0	1		
11.5	3		
12.6	1		

SALE OF MILK AND ICE CREAM.

The municipal regulations prohibit any person from carrying on the business of dairyman, purveyor of milk or cowkeeper within the Municipality unless (1) he is licensed by the Council as a purveyor of milk, and (2) any premises within the municipal area used by him as a dairy, milkshop or cowshed are licensed. The licences are annual and the Council has the power to refuse any application for a licence if the conditions are unsatisfactory. Cowkeepers whose cowshed premises are outside of the Municipality may supply milk to retail dairymen in Capetown, but the City Council has power to prohibit the sale of milk from any particular cowshed premises in this category if they are unsatisfactory.

The regulations also prohibit any person carrying on the business of manufacturer or vendor of ice cream on any premises or conveyance unless such premises or conveyance are licensed. The licences are annual and applications may be refused if conditions are unsatisfactory.

The number of dairy premises* in the Municipality at 30th June, 1935, was as follows:—

		30th June,	30th June,
		1934.	1935.
Cowsheds		97	86
Milkshops		171	134
Cowkeepers licensed to purvey	milk in		
Capetown, whose premises ar	re outside		
the Municipality		56	48

It will be seen that the number of premises in the Municipality where the husiness of cowkeeper was carried on was reduced during the year by 11 and the number of other dairies and milkshops by 37.

^{*} Including certain premises unlicensed but still in use at the end of the year under report.

There were also about 130 cowshed premises outside the Municipality from which milk was known to be supplied to retail dairymen in Capetown.

Two inspectors provided with motor transport devote all their time to the inspection of cowsheds, including those outside of the Municipality from which milk is sent into Capetown. Milkshops and ice-cream premises are under the inspection of the general health inspectors. During the year under report the inspections made were as follows:—

Dairy stables	 	 	 3,276
Milkshops	 	 	 5,099
Milk delivery carts	 	 	 4,997
Ice-cream premises	 	 	 1,091
Ice-cream carts	 	 	 112

Applications for annual licences have been dealt with as follows during the year under review:—

	Received prior to year under report.				Received during year under report.				
	Purveyors of Milk.			and	Purve	and			
	Cowshed premises in Capetown.	Milkshop premises in Capetown.	Premises outside of Capetown.	Manufacturers Vendors of Ice-cream.	Cowshed premises in Capetown.	Milkshop premises in Capetown.	Premises outside of Capetown.	Manufacturers Vendors of Ice-cream.	
Applications for licences received Licences issued	3 18 1	13 17 —	15 —		95 85 1 1 8	201 149 28 9 15	$ \begin{array}{c} 64 \\ 53 \\ 8 \\ \hline 3 \end{array} $	373 333 31 9 —	

Of the 333 persons licensed to make or sell ice-cream only 50 were licensed for its manufacture. The remainder were licensed only for selling ice-cream, not to be made on the premises. The 50 licensed for the manufacture of ice-cream include 4 who have a large wholesale trade.

Milk samples taken by the City Health Department are examined in the Union Health Laboratory, Capetown (500 samples per annum for total bacteria and coliform bacilli and 100 for tubercle bacilli by inoculation). The results of the examination of samples taken during the year under report are shown in the following tables:—

SAMPLES OF MILK TESTED FOR TOTAL BACTERIA AND COLIFORM BACILLI: YEAR ENDED 30TH JUNE, 1935.

MINA LESTED FUR LUTAL DAUTERIA AND COLIFORM DACILLI . I EAR ENDED JUTH JUNE, 1955.	Others with not more than 300,000 bacteria per c.c. and no coliform bacilli in 0.001 c.c.		က	1	58	34	بح	19	16	106	
	Others with not more than 200,000 bacteria per c.c. and no coliform bacilli in 0.01 c.c.			1	ı	34	10	7	14	7	73
	Not. more	than 30,000 bacteria	per c.c. and no coliform bacilli in 0.1 c.c.	1		17	9		7	ಣ	35
	Coliform bacilli present in 0.0001.			1	63	41	34	14	32	89	192
		.s.s 1000,0		2	23	31	18	6	27	55	111
	cilli in :		.o.o 100.0	ಣ		47	16	تن	19	18	109
	No coliform bacilli	.5.5 10.0		H		35	10	6	15	7	77
		.9.9 1.0				10	4		2	2	19
	oer c.c.	J e.e.				∞	63		TO	attractioneer .	- PERMINENTALIA
		More than 1,000,000,1		1	1	7	12	111	10	43	84
			000,000,1		-	4	12	ng.	7	13	45
	Number of bacteria per c.c.	Not more than	000,008			12		9	10	21	57
	ber of b		000,002	1		15	12	ç.i	16	12	59
	Num		000'001		1	61	21	10	21	17	131
CAMELIES OF			30,000	4	ಣ	73	20	4	36	12	152
Normal		Milk samples taken at			On delivery to retailer by cowkeeper (cowshed in Municipality)	On delivery to retailer by cowkeeper (cowshed outside Municipality)	On milk round of cow- keeper supplying retail customers (cowshed in Municipality)	On milk round of cow- keeper supplying retail customers (cowshed out- side Municipality)	In retailer's shop or depôt	On milk round of retailer	Totals

SAMPLES OF MILK TESTED FOR TUBERCLE BACILLI: YEAR ENDED 30TH JUNE, 1935.

,	Positive.	Negative.	No result.	Total.
Samples taken from mixed milk of herd: Capetown cowkeepers Outside cowkeepers Samples taken on round:		19		19
Capetown cowkeepers Outside cowkeepers		1		1
Retailers			_	
Capetown cowkeepers				
Outside cowkeepers	1	36		37
Total	1	56	_	57

In addition to the above routine samples certain other samples were taken to follow up the routine samples reported as positive. These numbered 12 (all

negative).

Following upon a report dated 11th April, 1934, by Dr. F. C. Willmot, Senior Assistant Health Officer for the Union, on the Capetown milk supply, communicated by the Secretary for Public Health, a report dated 11th June, 1934, was submitted by the Medical Officer of Health recommending a series of amendments to the Capetown Dairy Regulations. Amending regulations were drafted by the Council's Legal Adviser in consultation with the Medical Officer of Health. Since the end of the year under report these have been adopted by the Council and promulgated by the Provincial Administration. The chief alterations embodied in the new regulations are the following:

(1) The sale or delivery of milk (unless in quantities of one gallon or more delivered in a prescribed manner) is forbidden otherwise than in bottles or other prescribed containers, duly marked or labelled and filled and capped by an approved mechanical device in licensed premises only.

(2) A standard is set up for milk, of not more than 200,000 bacteria per c.c. and no coliform bacilli in 0.01 c.c., when sampled in a prescribed manner and tested by a prescribed laboratory procedure; and if milk supplied by a purveyor is not in accordance with this standard or fails to conform with the requirements of the Food, Drugs and Disinfectants Act, 1929, the Council may take such facts into consideration in deciding whether to grant or refuse an application for annual licence or to suspend or cancel such licence.

(3) Conditions are laid down for the use of the terms "grade A milk" and "Pasteurized milk," and restricting the use of such designations to persons to whom certificates or permits have been granted by the Council. Such certificates and permits may be cancelled if the conditions are infringed. The bacterial standards for "grade A milk" are those referred to above. Pasteurized milk is to be heated to 145-150° F. for 30 minutes and then cooled to 50° F., but the Council may accept a different temperature and time-period under certain conditions. The bacterial standard for pasteurized milk is not more than 100,000 bacteria per c.c. and no coliform bacilli in 0.01 c.c.

(4) The introduction of milk into the Municipality by any person from any dairy, milkshop or cowshed outside the municipal area is forbidden, unless the premises and person are licensed by the City Council in the

same way as local dairymen and premises.

(5) More stringent conditions are introduced for the cooling of milk, by mechanical means if necessary, and for the cleansing and sterilizing of vessels (except in milkshops where all milk sold is bottled elsewhere).

(6) No goods other than milk, milk products and eggs may be sold or kept in any dairy or milkshop, or in any shop, etc., opening into a dairy or milkshop

(7) No vehicle may be used for the conveyance or distribution of milk unless it bears a certificate of approval from the Council, to be renewed annually.

TEA SHOPS, CAFÉS, RESTAURANTS AND EATING HOUSES.

Municipal regulations provide for the annual licensing of these premises and the controlling of their equipment and management. Applications for licences are considered by the Trades Licences Committee after report by the Medical Officer of Health. The following is an analysis of the applications dealt with during the year ended 30th June, 1935:—

	Restaurants.	Tea Shops.	Cafés.	Eating- Houses.
1. Applications received	132	262	80	75
2. Granting of licences recommended (without conditions)	64	163	41	32
3. Granting of licences recommended (subject to conditions)	67	96	39	43
4. Number under item 3 later reported as having complied with conditions	54	86	31	34
5. Refusal of licences recommended	1	2	_	_
6. Applications withdrawn		1	_	_

REGISTERED TRADES.

Mattressmakers: Laundries.

The municipal regulations prohibit any person from carrying on the trade or business of mattressmaker or upholsterer, and from carrying on any laundry "by way of trade or for purposes of gain," unless such person is registered annually by the Council, which has the right to grant or refuse applications for registration.

Barbers and Hairdressers.

The regulations also prohibit any person from carrying on the trade or business of a barber or hairdresser unless such person is registered by the Council, which has the right to grant or refuse applications for registration. Annual renewal of registration is not required, but the Council is empowered to cancel the registration at any time.

The certificates of registration are issued by the Medical Officer of Health.

The following is an analysis of the applications dealt with during the year ended 30th June, 1935:—

		Mattress Makers and Upholsterers.	Laundries.	Barbers and Hairdressers.
Applications received Registration certificates issued Registration refused	• •	33 20 1	14 13 —	81 56 2
Applications withdrawn Applications in abeyance		11	<u>!</u>	23 —

TRADE LICENCES.

The Licences Consolidation Ordinance No. 19 of 1930 provides that a certificate must be obtained from the Council before a licence to trade as a general dealer, fresh produce dealer, baker, butcher, restaurant (etc.) keeper, hawker or pedlar is issued, and further that no application for such certificate shall be considered unless the Medical Officer of Health shall have reported that the premises are fit and suitable for the purpose, and that he knows of no reason why the licence should be refused on the grounds of public health. All applications for certificates are referred by the Trades Licences Committee to the Medical Officer of Health for report, and the consequent inspections involve a considerable amount of work on the part of the Health Inspectors. The licences, which are designed for revenue purposes, must be renewed annually, but the Council's certificate is only required when they are issued for the first time or transferred. Under the Council's regulations, however, hawkers and pedlars must be licensed annually.

The following is an analysis of applications for certificates dealt with during the year ended 30th June, 1935:—

	General Dealers.	Fresh Produce Dealers.	Butchers.	Bakers:	Hawker~.	Pedlars.
1. Applications received	1,102	375	118	7	1,266	28
2. Granting of Licences recommended (without conditions)	592	142	30		694	22
3. Granting of Licences recommended (subject to conditions)	490	225	81	3	285	1
4. Number under item 3 later reported as having complied with conditions	424	175	68	2	291*	1
5. Refusal of Licences recommended	8	2	5	3	193	3
6. Applications withdrawn	12	6	2	1	94	2

^{*} When referring to hawkers, item No. 4 to read "number under items 3 and 5 later reported suitable."

INSPECTION OF MEAT AND OTHER FOODSTUFFS.

The inspection of meat from animals killed at the Municipal Abattoir is under the control of the Veterinary Officer, and is reported on in the Mayor's Minute. No animals may be slaughtered elsewhere in the Municipality and all meat from animals slaughtered outside the City and brought in for consumption must be deposited at one of the depôts appointed by the Council. There it is inspected and stamped by the Meat Inspector attached to the City Health Department.

The following is a return of meat from animals slaughtered outside the City and brought in for sale within the municipal area, during the period 1st July, 1934, to 30th June, 1935:—

Description.	Ingracted	Passed.	Condemned	Condemne	d entirely.
Description.	Inspected.	rassed.	partly.	Amount.	Percentage.
Carcases of Beef	230	230	_	_	_
Carcases of Mutton	8,580	8,578		2	0.02
Mutton Joints (from above carcases)				3	_
Carcases of Goat	102	102		_	
Carcases of Veal	228	228			M
Carcases of Pork	13,503	13,457		46	0.34
Pias' Kidneus (from above	10,000	10,10		304	
Dian' Handa				155	
Danta of Danta				5	
Parts of Beef	994	994		_	
Parts of Mutton	4,058	4,058	_		
Parts of Veal	153	153	_		
Parts of Pork	146	131		15	$10 \cdot 27$
Ox Heads	169	169			
Ox Hearts	286	286	_		
Ox Tongues	1,045	1,045			_
Ox Livers	268	248		20	$7 \cdot 46$
Ox Lungs	162	159		3	1.85
Ox Kidneys	1,835	1,835			_
Ox Spleens	167	167	_		<u> </u>
Ox Skirts	1,033	1,033	_	_	
Ox Tails	1,093	1,093	_	_	_
Ox Tripes	171	171	_	_	_
Sheep and Goats' Heads	3,343	3,343			_
Sheep and Goats' Tongues	417	408	_	9	2.16
Sheep and Goats' Kidneys	554	554	_		_
Sheep and Goats' Tripes	3,109	3,109	_	—	_
Sheep and Goats' Plucks	5,595	5,192	401*	2	0.04
Sheep and Goats' Livers				401	
Sheep and Goats' Lungs				159	
Pigs' Plucks	15,188	12,894	1,735*	559	$3 \cdot 68$
Pigs' Livers				1,735	
Pigs' Lungs				1,380	
Pigs' Hearts				9	
Calves' Hearts	175	175		_	
Calves' Tongues	175	175	_		_
Calves' Livers	160	160			_
Calves' Kidneys	212	212	_	difficulty opening.	
Calves' Plucks	179	179			
Calves' Sweet Breads	250	250			

^{*} These items are included below in the columns concerned (Livers and Lungs, etc.).

The following return shows the number and portions of imported carcases of meat which were condemned at the depôts appointed by the Council, classified under the various diseases for which they were condemned, during the period 1st July, 1934, to 30th June, 1935:—

Tuberculosis.	11	14		1 1 1	150	1 1	10	1 1	ı
Tapeworm.	t 1	1	I 1	129	ı	1 1	1 1	1 1	1
Strongylus Rufescens.	1 1	1		167 1	1	1 1	1 1	1 1	
Sarcocysts.	1	1	1 1	1 1 1	1	1 1		1 1	
Pneumonia.	1 1	ı	1 1	1 1 1	1	1 1	74	1 1	
Pleurisy.	1 }	1	1 1	1 1 1	1	1 1	1 1	۱ -	4
Peritonitis.	1 1	ı	1 1	1 1 1	I	1 1	1 1	۱ –	1
Pericarditis.	1 1	1	1 1	1 1 1	1.	410	27	1 1	
Nephritis.	1 1	1	1 1	1 1 1	1	48	1 1	1 1	
Measles.	32	1	1 1	111	1	1 1 2	621	1 1	
.eoibanat		1	1 1	1 1 1	1 -	- 1	1 01	1 1	
.noitsmmshuI	1 1	t	161	145	۱۶	e :-	13	1224	
Ејикез.	1 1	ı	1 1 9	997	ı	1 1 6	7	1 1	
Decomposition.	- 1	1	<u>ه ۱</u>	1 101	1	14	256	77	
Cysts (Hydatid).	1-1	ı	110	စ္စ္ ၊	1 -	276			
Cirrhosis.	1 1	ı	1 1	1 []	ı	1 10	46	1 1	
Caseous Lymphadenitis.	1.1	1	1 1	191	ı	1	1	1 1	
Bruised,	1 1	-	1 1	1 1	ا م	1	ļ	1 60	
Number.	45	15	60	401 159 3	155	324	1735	1380 5	
	::	:		:::	:	: :	: :	::	
on.	**		oat						
Description.	of n	:	es es	:::		ys	:	: :	
escr	rcases Mutton Pork	of	Tongues Plucks	Livers Lungs Joints	gs': Heads Hearts	Kidneys Plucks	Livers	Lungs Joints	
Ã	Carcases of: Mutton Pork	Parts of: Pork	Sheep and Goats': Tongues Plucks	Loi.	Pigs': Heads Hearts	Kić	Liv	Lu	
			9 2		had.				

The following carcases with slight infections with cysticercus were discovered and interned in cold storage for the prescribed time:—

Removed from				Measly Carcases.	Beef. Weight.	Measly Pork. Carcases. Weight.		
Municipal A Capetown o				• •	544	667,485 lbs.	28 118	1,976 lbs. 8,247 lbs.
Γ	'otal	• •	• •	• •	544	667,485 lbs.	146	10,223 lbs.

In addition to the above, 32 carcases of beef (17,010 lbs.) discovered in places outside of the municipal area to be slightly infected with cysticercus, were interned in cold storage.

Imported meat.

The	following	were	imported	from	Walvis	Bay:—
-----	-----------	------	----------	------	--------	-------

Fore quarters of	beef	 	 	1,009)
Hind quarters of	beef		 	1,009 $1,220$ (184,993 lbs).
Carcases of veal		 	 	172 (25,655 lbs).
Ox skirts		 	 	1,651
Ox kidneys		 		1 700
Ox tongues		 	 	972
Ox tails		 	 	935
Ox livers		 	 	94
Ox hearts		 	 	110
Calves' plucks		 	 	175
		 	 	175
Calves' sweetbread		 	 	250

A great part of this meat is sold to shipping, and is not inspected by the Department; but some of it, especially the viscera, is used for local consumption, and is included in the foregoing tables of meat inspected.

There were also 14 quarters of beef (1,700 lbs.) sent from Rhodesia with meat for cold storage pending export overseas, which were shut out of shipping owing to lack of accommodation and were retailed for local consumption. These are also included in the tables.

Food Inspection by Health Inspectors.

The following foodstuffs were condemned as unfit for human consumption as the result of ordinary inspections by the health inspectors or the meat inspector, other than inspections of imported meat, during the year ended 30th June, 1935:

1 1		, , , , , ,		J Jan.	- 011400	. 3001	aire,
Meat:						Weig	ht.
${f Beef}$						1,713	lbs.
Pork						34	,,
$egin{array}{cccc} egin{array}{cccc} egin{array}{ccccc} egin{array}{cccc} egin{array}{ccccc} egin{array}{ccccc} egin{array}{ccccc} egin{array}{cccc} egin{array}{cccc} egin{array}{ccccc} egin{array}{ccccc} egin{array}{ccccc} egin{array}{ccccc} egin{array}{ccccc} egin{array}{ccccc} egin{array}{ccccc} egin{array}{ccccc} egin{array}{cccc} egin{array}{ccccccc} egin{array}{ccccc} egin{array}{ccccc} egin{array}{ccccccccc} egin{array}{ccccc} egin{array}{cccc} egin{array}{cccc} egin{array}{ccccc} egin{array}{ccccc} egin{array}{ccccc} egin{array}{cccccccc} egin{array}{cccccccccc} egin{array}{cccccccccccccccccccccccccccccccccccc$						148	,,
Calf						100	,,
Ox heads						140	,,
Sheeps' heads						2,420	,,
Sheeps' tongues						$13\frac{1}{2}$,,
Sheeps' tripes						375	,,
Minced meat						$1,129\frac{3}{4}$,,
Mixed meat						343°	,,
Poultry and game:							
Turkeys						295 1	
Geese						$140^{\frac{2}{2}}$,,
Ducks						251½	,,
Fowls						$3,976\frac{1}{2}$,,
Pigeons						3	"
		•••		•••	•••	0	"
Fish:						0.0501	
Preserved fish	• • •			• • •	• • •	$3,352\frac{1}{2}$,,
Fruit and vegetables	3:						
Pears						2,920	,,
$Grapes \dots$						1,302	,,
Dates						40	,,
Other provisions:							
Cooked meats						$6\frac{3}{4}$	
Ham	•••					176^4	"
Tinned fish						$2,498\frac{3}{4}$	"
Beef dripping						46	"
Cl1						806	"
Condensed mill			• • •			$\frac{3}{4}$	"
Eggs						230^{4}	,,
17						560	, ,
Beans						800	, .
Kaffir corn mal					• • •	2,610	"
Jam						306	11
Preserved fruit						631	,,
OI " O A.						263	,,
						1	,,
~ .~						$64\frac{1}{2}$	"
Poppyseed						37^2	"
Pickles and deli	cacies					$34\frac{3}{4}$,,
Other tinned fo	ods				• • •	$483\frac{1}{9}$,,
*						2	,,

CASES BEFORE THE MAGISTRATE.

The following table gives particulars of cases heard by the magistrates in the year ended 30th June, 1935, at the instance of the City Health Department. In most of the cases there were two or more separate counts: the counts are not enumerated in the table. In some cases more than one person was summonsed for the same offence: if any one accused was fined or reprimanded the case is recorded in the table accordingly, notwithstanding that the other accused may have been discharged:—

		Nu	mber	of Cas	ses.		ons d.		
Nature of Offence.	Total.	Fined.	Suspended Sentence.	Repri- manded.	Summons withdrawn.	Dis- charged.	No of persons summonsed.	Total Fine	s.
Dwelling-house premises in insanitary condition (excluding the keeping of animals) Business premises in insanitary condition.	6(1) 2	3		$\frac{2}{2}$		1	8 2	£1_5	0
Keeping animals or poultry on premises so as to cause nuisance	4	4	_		_	_	4	4 10	0
Insanitary conditions at food premises: Butchers' shop premises	4(2)	4	_	-			7		0
Milksellers' premises (no cows kept) Other food premises	$\frac{1}{11(^3)}$	8	1	2	=	_	$\frac{1}{12}$		0
the transport or delivery of foodstuffs: Meat Milk Other foodstuffs	12 54 1	11 47 1			_ _ _	1 4 —	16 77 3	69 12	6 6 0
Selling, etc., diseased, unsound or unwholesome foodstuffs: Meat Selling, delivering or depositing meat not	1	1		-	_	_	2	1 0	0
slaughtered at the Municipal Abattoir or not inspected and stamped	2(4)	2			_	_	3	6 12	6
Trading as milkseller without licence (not cowkeeper)	1 5	$\frac{1}{2}$	1	_	_		1 7		0 0
Food, Drugs and Disinfectants Act: Milk Ice cream	44 1	36 1	_	3	_	5	52 1		0
Sausage	3	$\frac{2}{1}$	_		1	_	3	$egin{array}{ccc} 2 & 0 \ 1 & 0 \end{array}$	0 0
Cream cheese	3	1	_	_	_	1	4 1 1	0 10	0 0
Dwelling-house premises used as a wash- house without being registered as such		1							
by the Council	1	1	-			1	1	0 5	0
Practising midwifery after prohibition by local authority	1				_	1	1		
Expectorating on floor of public place Obstructing Health Inspector in perform-	1	1	_	_	_	-	1		0
ance of his duty	1	1					1		0
Total	163	131	2	12	2	16	211	£250 7	6
									-

⁽¹⁾ Amongst these cases are two including a count for keeping animals on premises so as to cause nuisance.

⁽²⁾ Amongst these cases is one including a count for exposing for sale, etc., meat not inspected and stamped.

⁽³⁾ Amongst these cases is one including a count for trading as an ice-cream vendor without a licence.

⁽⁴⁾ Amongst these cases is one including a count of insanitary conditions or other offences in the transport or delivery of foodstuffs (meat).

PUBLIC SANITARY CONVENIENCES.

The following is a list of the public sanitary conveniences open at 30th June, 1935, together with the number of chalet attendants employed in connection with them:—

Chalet.						endants.
TO 1					Male.	Female.
Bakoven	• •				1	
Camps Bay	• •				$\frac{2}{2}$	_
Castle Bridge	• •		• •	• •	2	are resources
Castle Street					$\frac{1}{2}$	-
Claremont				• •	$\overline{2}$	
Claremont Park					1	1
De Waal Park					2	1
Dock Road					2	
Early Morning Marke	et				2	1
Fishmarket (Retail)						1
Gardens					2	1
Green Point Common	٠.				1	
Greenmarket Square					2	2
Hanover Street					2	1
Jurgen's Park					2	
Kalk Bay					2	1
Ladies' Rest Room,	Parade				_	2
McGregor Street					2	
Maitland		••	• •		$egin{array}{c} 2 \ 2 \ 2 \end{array}$	
Mowbray		• •	• •	••	$\frac{1}{2}$	1
Muizenberg Beach	• •	• •	• •	• •	$\tilde{2}$	$\frac{1}{2}$
Muizenberg (Closed 30				• •	ĩ	ĩ
Museum, Capetown			1994)	• •	$\overset{1}{2}$	1
			• •	• •	1	$\frac{1}{2}$
New Fishmarket (Wh			• •	• •	$\frac{1}{2}$	1
Riebeek Square			• •	• •	$\overset{2}{2}$	1
Rochester Estate, Sal			• •	• •	2	1
	1.1.		.1 14	004)	$\frac{z}{1}$	
St. James Beach (Ope			iber, 1	934)		1
Salt River Market		• •	• •	• •	$\frac{2}{2}$	$\frac{1}{2}$
Sea Point	70 7 40		* *	• •	2	2
Sea Point Swimming	,	oloure	d)	• •	· · ·	1
		• •			`2	1
Three Anchor Bay				• •		1
Woodstock					2	2
34 chalets			• •		54	29

In addition to the above there are three relieving attendants, one male and two female.

MUNICIPAL WASHHOUSES.

The washhouses, except the one at Hanover Street, are supplied with cold water only, and the drying and bleaching are done in the open air. Those at Hanover Street, Hout Street and Wynberg are equipped with electric irons, but not the others. At the Hanover Street Washhouse the washing troughs are supplied with steam and "hydro-extractors," drying chambers, ironing machines and electric irons are provided.

At the Hout Street Washhouse there is also an installation of slipper baths.

The charges made at the washhouses are as follows:-

4.7					
Platteklip			 	 	3d. per day.
Mowbray			 	 	
Claremont			 • •	 	3d. per day.
Kalk Bay			 	 • •	6d. per day.
Hanover St.	reet:				
For 2	hours		 	 	3d.
For 3	hours				
For 4 h	nours		 	 • •	9d.
For 5 h	nours				
For 6 h	nours		 	 	1/3
For 7 h	nours	and over	 	 	1/6

Wynberg:				
Washing			 	4d. per day.
т '			 	1d. per hour.
Hout Street:				
Washhouse:				
Washing			 	4d. per day.
Ironing		• •	 	ld. per hour.
Baths:				
Hot Water	•			
Adults			 	6d.
Children			 	4d.
Cold Water				
Adults		• •	 	4d.
Children			 	3d.

As from 27th June, 1935, the charges for baths at Hout Street were reduced to the following: hot water, adults 3d., children 2d.; cold water, adults and children 1d.

The attendances and takings at the washhouses (including ironing rooms) during the year ended 30th June, 1935, were as follows:—

				·			Attendances.	Money	Ta	ken.
								£	s.	d.
Hanover Str	reet						15,839	398	9	3
Platteklip							7,793	97	8	3
Mowbray							5,064	63	6	0
Claremont							2,901	36	5	3
Kalk Bay							2,392		16	0
Hout Street							12,245	221		2
Wynberg						• •	9,770	139		$\tilde{9}$
., 7 110018	• •	• •	• •	• •	• •	• •		100		
		Tot	al				56,004	£1,016	11	8
							•			

The attendances and takings at the Hout Street slipper baths during the year ended 30th June, 1935, were as follows:—

		Но	t Baths.	Cole	d Baths.	Total.					
		Atten- dances.	Money Taken.	Atten- dances.	Money Taken.	Atten- dances.	Money Taken.				
Adults Children	• •	2,148 134	£ s. d. 53 12 0 2 4 8	38	£ s. d. 0 10 6	2,186 134	£ s. d. 54 2 6 2 4 8				
Total	• •	2,282	£55 16 8	38	£0 10 6	2,320	£56 7 2				

PAUPER BURIALS.

The Public Health Act places upon the City Council the responsibility for the removal and burial of the body of any destitute person, or any dead body which is unclaimed, or of which no responsible person undertakes the burial. The cost falls upon the City Council although it may be legally recovered from any responsible person who is able to pay. Practically all such burials undertaken by the Council are, however, of the bodies of persons whose relations are unable to pay and very little is recovered. Each year a contract is given out to an undertaker to carry out this work for the Council. In the year ended 30th June, 1935, the number of such burials was 456.

METEOROLOGY.

The collection of certain meteorological data is undertaken by the Department. A Stevenson's screen, with dry and wet bulb and maximum and minimum thermometers, sunshine recorder, barometer and earth thermometers (4 ft., 2 ft., and 1ft.) are kept in the grounds of the City Hospital, Portswood Road. The results of the observations are given in Tables K to O on pages 137 to 141.

CLERICAL STAFF.

At the end of the year the clerical staff consisted of the Chief Clerk, 19 clerks, 8 junior clerks and 1 messenger, in addition to 5 lady clerks, of whom 3 were employed in connection with the work of the health visitors and 1 at the City Hospital, Portswood Road.

SECTION VI.—TUBERCULOSIS AND VENEREAL DISEASE CLINICS.

TUBERCULOSIS CLINICS.

(Prepared by Dr. J. F. Wicht, Medical Superintendent of Hospitals.)

The Tuberculosis Clinic is situated at 50, Newmarket Street, Capetown. Three sessions are held per week—one for Europeans of both sexes, one for non-European females, and one for non-European males.

The building in which the clinic is conducted is an adaptation of two semi-

detached cottages.

There are five rooms, one of which, by reason of its shape—long and narrow—has been converted into a waiting room. One room is set aside for the use of the resident caretaker, another has been divided up into dressing cubicles, while of the two remaining rooms one is furnished as a registration room with dispensary, and the other, into which the dressing cubicles open, as a consulting room.

A second tuberculosis clinic designed and built on modern lines was opened at Church Street, Wynberg, on 13th May, 1935, and two sessions are held each week, viz., Monday, 2.30 p.m., Europeans; Friday, 2 p.m., non-Europeans. The building has a spacious waiting hall which gives access to two consulting rooms with dressing cubicles, a glass-walled clinical room and a large combined dispensary and registration room which is provided with a recessed compartment. Patients enter the compartment for purposes of registration and history-taking and it is so constructed that privacy is ensured.

The design of the clinic is simple and the sessions are easily conducted with the help of two health visitors—one in the doctor's room and another in the

dispensary.

The work of the clinics is mainly as follows:—

(1) Selecting cases suitable for Nelspoort Sanatorium.

(2) Recommending hospital treatment for patients whose disease is in too active a condition for sanatorium treatment. In many cases, after a period of treatment in the City Hospital, the disease becomes less active and the patient is sent to Nelspoort for further treatment.

(3) Recommending the more advanced cases for admission to the City Hospital. It is often necessary to admit cases who are dying and perhaps

destitute.

(4) Palliative treatment to those unable or unwilling to be admitted to hospital.

In addition to this, doubtful cases are investigated, and, if necessary, admitted to hospital for observation.

The clinics help also in educating patients as to how they should conduct

their lives on hygienic principles, so as to avoid infecting others.

The Medical Officer is always willing to examine contacts and suspects, but these do not usually take advantage of the opportunity, and the majority of the patients have fairly advanced disease.

Many patients whose disease is in a more early stage refuse institutional treatment, as they do not feel sufficiently ill; later, when their disease has progressed considerably they demand admission to Nelspoort, and have to be informed

that they are not suitable for sanatorium treatment.

To obtain the best results from sanatorium treatment, the disease should not be in too active a condition. While the disease is progressive the patient should be kept at rest in bed, and when the disease becomes quiescent, sanatorium treatment is indicated. In other words, the sanatorium is to be regarded in the light of a convalescent home, and this is the principle on which the clinics are conducted. Where possible, patients are admitted to hospital for rest treatment, and in some cases patients are advised to rest at home under the supervision of the health visitors.

The three health visitors render invaluable assistance to the medical officer by marshalling facts concerning patients whom they visit in their homes, and by rounding up notified patients and persuading them to apply for treatment.

Out-patients receiving artificial pneumothorax treatment are given refills at the City Hospital in a small operating room provided with an X-ray plant for

screening purposes.

During the year there were 6,620 attendances at the clinics as compared with 6,640 in the previous year. The following are the details:—

		1034_	-19 3 5.			1933-	1934		
Race.	Atten	dances.		Cases.	Atten	dances.		Cases.	
	Males. Females.		Males.	Females.	Males.	Females.	Males.	Females.	
Newmarket Street Clinic: European Other	770 2,176	1 /		136 362	852 2, 393	1,012 2,383	106 277	118 279	
Persons	2,946	3,479	435	498	3,245	3,395	383	397	
Total	6,	425	95	33	6,0	340	780		
Wynberg Clinic: European Other	20 65	22 88	3 12	3 15					
Persons	85	110	15	18					
Total	1:	95		33					

The following table shows the admissions to Nelspoort Sanatorium during the year 1934-35:

Race.			Males.	Females.
041		• •	41 28	34 39
Persons	• •		69	73
Total	• •	• •	14	2

MUNICIPAL TREATMENT CENTRES. (Prepared by Dr. C. K. O'Malley, M.C.)

A review of the attendances at the three municipal treatment centres for venereal diseases during the year 1934-35 shows (a) a decrease in the total number of new cases, viz., 3,046 as compared with 3,426 in the previous year; (b) a decrease in the number of consultations, viz., 31,729 as compared with 35,612.

The following table sets out the figures for new patients considered from the standpoint of sex, race and disease:—

	$Sex_1 \dots \dots$	Males Females	•••	•••	• • •	•••	1,892 1,154
							3,046
2.	Race	Europeans Non-Europeans	•••	• • •	• • •	• • •	957 2,089
							3,046
3.	Disease	v x	• • •	•••	•••	• • •	1,206*
		Gonorrhea					911
		Other conditions	3	• • •	• • •	• • •	929
							3,046

^{*}Including 53 cases also suffering from Gonorrhea.

During the year under report plans were prepared for the erection in Spencer Road, Salt River, of a new treatment centre to take the place of the premises in Salt River Road which had been rented for the purpose for some years. The building has been completed and brought into use since the end of the year.

A further and notable advance in providing facilities for the treatment of venereal diseases was the institution of a service of intermediate treatment for female patients by the trained nursing staff.

The male case with gonorrhea is well provided for; he is encouraged to attend daily for irrigation treatment and this he can carry out himself under conditions of comfort and cleanliness.

Not able to carry out self-treatment the female patient with gonorrhea suffers under a great disadvantage thereby. Now this type of patient can attend three or four times weekly at the clinic, where the necessary treatment is carried out by the female nursing staff of the Venereal Disease Department. The nurses make special attendances at each clinic for the purpose and careful records are kept.

Defaulters from treatment are, unfortunately, numerous; at present the Department has not an organised system for dealing with the important problem of the defaulter, i.e., the person who absents himself from treatment as soon as the external signs of his disease have disappeared, but who still is uncured and liable to relapse into a contagious state. Towards the end of the year a system of following up cases by letter was instituted. A special clerk was allocated to to this work and a special card-index system was devised.

Cases of lymphogranulomatosis are occurring sporadically and the writer feels that the disease is important enough to receive official recognition as a venereal disease. The whole matter of the classification of venereal diseases for the purpose of records is described of attention for possible revision.

of records is deserving of attention for possible revision.

The following table shows the number of new cases of venereal disease registered in a few large cities compared with their respective populations:—

	City	•		Year.	Total new cases.	Population.	Rate per 1,000 Population.
Capetown Johannesburg	and	Rietfor	 itein	1933-34	4,126	286,708	14 •4
Hospital	• •	• •	• •	1933-34	4,483	412,700	10.9
Glasgow	• •	• •	• •	1934	5,602	1,115,590	5.0
Hull		• •	• • •	1934	1,480	319,600	4 .6
Birmingham	• •	• •	• •	1934	3,101	1,028,000	3.0
Coventry	• •	• •	• •	1934	481	184,900	2 • 6

The following table shows for a series of years the total new cases registered at all the Municipal Treatment Centres and the rate per 1,000 of the population:—

popul	ation.
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	·8 ·6 ·8 ·5 ·4 ·9 ·1 ·6 ·8 ·5 ·4 ·9 ·1 ·6 ·6 ·8 ·5 ·0

The table on the next two pages gives in detailed information the attendance for each disease:—

The following table affords a summary of the more comprehensive table on page 98. The figures include the cases of venereal disease seen and treated at the Pre-natal Clinics at the Welfare Centres:—

Type of Disease.	Euro- pean.	Non- Euro- pean.	Total.	No. of consultations	34,749 33,102 10,040
Primary and secondary				No. of intramuscular injec-	10,010
syphilis	95	378	473	tions	8,808
Tertiary syphilis	91	1,081	1,172	No. of specimens for Wasser-	
Syphilis of the C.N.S.	2	23	25	mann reaction (V.D. Clinics)	4,764
Congenital syphilis	23	213	236	No. of specimens for Wasser-	
Gonorrhoea	458	453	911	mann (Pre-natal Clinics)	4,431
Other venereal diseases	33		130	No. of smear examinations	
Non-Venereal diseases	272	413	685	for gonococci	3,851
Undiagnosed	18	96	114	No. of operations	4
				No. of sessions held during	
Totals	992	2,754	3,746	the year	1,038

ine	of of ant	en.		Negative.										AND STREET	Pillora	11	479	490	19	463	
Rout	Blood Tests of Pregnant	Wom		Positive.							1						88	88	63	55	57
				Operations.	67 1	1 63 1 1	1 4	11	1 1 1	1 1 1	1	1 1	1 1 1	1 1 1		1 1	1111	1	1 1	111	1 1
			'suo	Smear Examinati	336 299	192 399 203	1,684	599	250	269	1,835	33	33	3778	329	1 1	1 1 1	1 -	1	1 1	
		·u	oito.	Kes I ansmisses W	479 199 16	222		667	109 359	406 120 162	2,085	61	10 250	213 42 65	719	11	580	591	22	528	550
		.enoi	ject.	Intramuscular In	589 370 9	1,271 678 74	3,174	1,201	126 504	843 340 296	3,808	138	21 21 658	365 119 142	1,552	1 1	101	61	1	l 00 l	1 8
		• ទប	oppo	Infravenous Injec	473 468 -	1,039 739 4	2,768	1,093	122	1,495 7 28	3,511	102	605	 320 350 300	1,452	cı l	494	496	$ \infty $	178	186
		•stas	mte	erT etsibemieta	6,102	5,494	11,613	15,090	47 2,612	- 1	17,835	1,614	2,038	1 1	3,652	1 1	1 1 1 1	1	1 1	1 1 1	1
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Casses.	Patients			Gonorrhoes only.	128	199	416	242	108	22.	398	21 870	411	11 - 2	97			t	1 1	1 1 1 1	1
New Cases.	which	τ	loot! Il l	Syphills and Gonc —Patlents with diseases—included preceding column	121	Oro 1 -	19	4-1	1 ∞ ç	1 1	25	1 1	1 00 +	→ , ,	6	1 1	1 1 1 1	1	1 1	1111	
	s from			Syphilis, Congeni	60 60	27110	75		30,0	5.5° 5.4° 5.4°	133	1 1 1	1 1	196	17	1 1		1	1 1	1111	1
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			٠,	Syphilis, Tertiary	14	48 122 -	194	16	1 1 51	164	214	401	15,	1 00	22	1 1	96	96	61	18811	91
				Syphills, Primary and Secondary.	113	124 60 22	234	36 8	96	98 1	179	1001	1 41	- 67	09	1 1	1 1 1 1	1		+ 1 1 1	1
				Total.	254 53 6	200 248 34 448	1,237	436	321 321	83 122	1,316	67 28 28	12	30 30 66	493	1 1	96	96	23	88	91
		•	ຊວວນ	rsbastik latoT	2,841 1,609 52	2,680 2,680 2,880 232 232	12,102	6,062	774 1,947	9,750 546 952	14,721	704 426 99	1,675	1,500 246 396	4,906	- 23	535	537	10	261	271
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30	09	116	18		1	1 1 1 7 1 1	1	10011	10		36 29 21	98	10 10 85	95		2, 165 2, 433 5,070 562 624	1
129	316	243	245	3777	377	6 - 141 - -	147	124	124	61 1 1	322	324	883	94	1,668	2,116 4,909 40 87	10,040
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Clinic)		:		:				:		:			Hospital		:		
(Pre-Natal Clinic)		d (Pre-Natal Clinie)		al Clinic	Claremont (Pre-Natal) Clinic	ataı) CI		g (Pre-Natal Clinic)		(Pre-Natal Clinie)		1			•		
		re-Nat		(Pre-Natal	Dro. No	1.91-1		re-Nat		re-Nata		A C A	Maceri Sal Clir		•		
Woodstock				43	amont (этоша							Teminsma materinty (Fre-Natal Clinic).				
Wo		Maitlan		Athlone	Clar			Wynber		Retreat		*		6	TOTALS		

*This is a voluntary Clinic supplied with Government drugs through the Corporation.

SECTION VII.—CITY HOSPITALS.

(By Dr. J. F. Wicht, Medical Superintendent of Hospitals.)

The hospitals for Infectious Diseases controlled by the City Council are two in number, the City Hospital, Portswood Road, and Rentzkie's Farm Isolation Hospital.

STAFF (30TH JUNE, 1935).

Medical Superintendent of Hospitals: J. F. Wicht, M.D., Dublin, D.P.H., Capetown, Tuberculous Diseases Diploma (University of Wales).

Two House Physicians (appointed for a period of six months).

City Hospital.

Matron (Miss A. M. Leslie). Assistant Matron (Miss L. Lloyd).

Home Sister. Night Sister. 6 Ward Sisters.

Ward Sister for Venereal Disease Wards and female Clinics.

Staff Nurses.
Student Nurses.
Probationers.
Dispenser.
2 Porters.

Domestic and labouring staff.

Isolation Hospital.

Caretaker.

CITY HOSPITAL FOR INFECTIOUS DISEASES, PORTSWOOD ROAD.

This hospital is situated near the North Gates of the Docks and is bounded on the south-western side by the Green Point Sports Ground, from which it is separated by an iron fence. The New Somerset Hospital, forming the north-eastern boundary, is separated from the hospital by a road. The north-western boundary is a piece of ground laid out in tennis courts by a sports club, while Portswood Road forms the south-eastern boundary. Except for the portion between the hospital and the Green Point Sports Ground the site is surrounded by a wall. The total area of the hospital ground is $7\frac{3}{4}$ acres, and since the recent extensions the buildings comprise the Medical Superintendent's residence, house physicians' bungalow, the administrative block and nurses' home, seven infectious diseases wards, two temporary wards, discharging block, venereal disease wards and clinic, laundry, disinfecting station, garages, stores, ambulance drivers' cottages, and natives' quarters.

The first buildings were erected in 1899 and were occupied by the military authorities during the Boer War until 1902, when the hospital was opened for the isolation and treatment of infectious diseases.

For many years the hospital consisted only of the Medical Superintendent's residence, a portion of the administrative block and two wards (Isolation and Scarlet Fever). Additions were made in the following order: Enteric Ward, Tuberculosis Chalets, Diphtheria Ward, Tuberculosis Ward, Venereal Disease Block, and the Administrative Block was enlarged to accommodate the increased nursing staff.

A house physician's bungalow with two bedrooms and a small dining room was built in 1930 and in August of that year a second house physician was added to the staff. It is the duty of one of the house physicians for half of his term of office to attend the sick in the native locations at Langa and N'dabeni, and to treat patients under the supervision of the Medical Superintendent of Hospitals in Langa (native) hospital.

A new double-storied block to accommodate nearly 100 non-European tuberculosis patients was completed and brought into use early in 1931, and a woodand-iron ward was altered to provide four double-bedded isolation rooms. To provide adequate housing for the increased staff an additional nurses' home consisting of 32 bedrooms, together with recreation rooms, store rooms and ironing rooms was built. At present it is necessary to accommodate patients on the stoeps (verandahs) of the tuberculosis and diphtheria blocks, as the wards are not large enough. In connection with the proposed enlargement of the hospital the wide stoeps will be preserved but it is hoped that there will be a sufficient number of indoor beds for all needs.

It is our practice to allow visits to patients twice weekly (on Wednesdays and Sundays). Children under 16 years are not allowed and visitors to the infectious blocks remain outside the wards and converse with the patients through the windows. In cases of dangerous illness near relatives are allowed to enter the

ward, and special precautions are taken to avoid infection.

A course for a certificate in Infectious Diseases Nursing for nurses who hold the certificate of general training was instituted in 1929, and lectures are given at weekly intervals by the Medical Superintendent. In addition to this a scheme is in operation by which nurses who are undergoing their general training are taken on for periods of three months, during which time they receive instruction in the principles of fever nursing.

The proximity to the Somerset Hospital allows of a certain amount of team work which would otherwise be impossible in a hospital with a medical staff of four

(Superintendent, Venereologist and two House Physicians).

Radiographic work is carried out at the Somerset Hospital by arrangement with the Cape Hospital Board authorities and, owing to the courtesy of the honorary visiting staff of the Somerset Hospital, aid is always forthcoming for patients who need advice or treatment in the special branches of medicine such as laryngology, ophthalmology, etc. Routine bacteriological and pathological work is carried out by the Government laboratory. By arrangement with Professor Ryrie, of the University of Capetown, autopsies and special pathological investigation are conducted by the University staff. Professor Ryrie and Dr. Vadas, his assistant, render valuable aid to the hospital in this branch of medical science. Biochemical investigations are carried out by Dr. Linder who also undertakes the treatment of patients found to be suffering from diabetes.

The hospital provides facilities for the study of infectious diseases, and is attended by medical students and also by graduates in medicine who are taking the diploma in Public Health. The Medical Superintendent is University Lecturer in Infectious Diseases, while Dr. O'Malley holds the lectureship in

Venereal Diseases.

The hospital possesses a small operating theatre and major operations are performed by the consulting surgeon, Mr. T. Lindsay Sandes, M.D., F.R.C.S. During the year under report the operating theatre was used on 39 occasions, as follows:—

Laparotomy for perforated typhoid ulcer	4
Laparotomy for other causes	. 8
Thoracoplasty (first and second stage) partial	
Rib-resection for empyema	2
Tonsillectomy	
Mastoid operation	
Hydrocephalus (trephining)	
	39

Reference to the tables included in this section show the diseases most commonly seen in the hospital practice and in the following portion of the report a résumé of interesting facts will be given.

In previous reports paragraphs have dealt with the usual types of infectious disease met with in the wards of the City Hospital, and I have described special features such as mildness or severity, complications and other points which may be of interest to readers.

During the year under review no change of type has occurred in any of the diseases, and it is not necessary to repeat the descriptions in full.

Scarlet Fever is usually mild, and is rare in the coloured and native races.

Diphtheria attains its highest fatality rate when the larynx, trachea and bronchi are affected. Many of the severe cases of so-called laryngeal diphtheria are in reality "tracheobronchial" diphtheria and in some the membrane extends to the smaller bronchi.

Death from diphtheria is unusual in adults and the following case is recorded on this account. It is interesting to note that death occurred after several weeks and that the patient appeared to be doing well.

Miss Y, aged 31, a school teacher on holiday in Capetown, was admitted with severe faucial diphtheria complicated by quinsy. There was extensive membrane with foetor of the breath and glandular enlargement, and her sallow colour indicated marked toxaemia. A grave view was taken of her case, and early cardiac failure was feared. She was given 100,000 units of diphtheria antitoxin and was put on intravenous glucose with insulin. Within a few days her condition improved, the membrane cleared up fairly rapidly and her colour became so much better that a more cheerful prognosis was given, though from previous experience of severe diphtheria in adults it was expected that she would probably not escape without at least a mild palatal paralysis. On this account every precaution was taken to keep her at absolute rest, and as she was an intelligent woman she remained perfectly quiet in bed with only a single low pillow. During convalescence her bed was put out on the stoep (verandah) and as the weeks passed she became sunburnt and looked positively well. In the seventh week palatal paralysis appeared and became severe within a few hours. Difficulty in respiration soon followed, the chest became full of mucus, she was unable to swallow and within twenty-four hours she was dead.

An interesting case of diphtheritic paralysis of the palate occurred in a nurse who had suffered from sore throat two or three weeks previously and who was noticed to have developed a peculiarity in her speech. In her case no ill effects followed and the paralysis cleared up in about ten days.

Anthrax is rarely seen in the hospital, but a case occurred outside the muni-

cipal area and the patient was sent to us for treatment.

A. B., European male aged 26 years, a farm overseer, was ordered by his employer to make a post mortem examination of the carcass of a cow which had died suddenly. Two days later another cow died and he was again told to examine the carcass. Both the employer and the overseer had only a rudimentary knowledge of veterinary anatomy and it is not surprising that they were unable to account for the death of the two animals. Within a day or two the overseer developed lesions on both wrists, and the local sanitary inspector, who was called in, decided rightly that the cows had died of anthrax, and that the man had become infected at the autopsy. The lesions were typical and there was lymphangitis but not much constitutional disturbance. A rather unusual feature was present in that there were four malignant pustules—two on each wrist. The patient was given Sclavo's serum and N.A.B., and the lesions cleared up rapidly. Within a few days the patient was asking to be allowed to return to his work, as, being unable to read, he found hospital life boring.

Tuberculosis.—An unusual cause for haemoptysis was found in the following case: Mr. S., aged 46 years, a European male railway employee, was admitted to the tuberculosis ward as the result of an urgent telephone call by his doctor. On admission he gave a history of copious haemoptysis and appeared pale and bloodless. He was too weak to be examined, but fortunately the haemoptysis

stopped and within a few days he was convalescent.

In the meantime his doctor had called at the hospital and had given a more detailed account of the patient's illness. It appeared that about a fortnight before his admission to hospital the patient had been lunching off tinned salmon and had swallowed what he thought was a bone. He had gone to the Railway Surgery and in the doctor's absence the attendant had passed a probang. The pain in the throat had persisted and a few days later hoarseness had appeared. A laryngologist had examined the patient and had found that there was swelling and fixation of the right vocal cord. Soon after this, baemoptysis had begun and had become so severe that the doctor had asked me to admit the patient to the tuberculosis ward.

This history threw doubt on the diagnosis of tuberculosis and as soon as the patient was strong enough a skiagram was taken. A few fluffy shadows were visible in the hilus regions but there was no evidence of pulmonary disease. To our surprise we saw the shadow of a pinhead outwards on the right side of the neck. Another skiagram was taken, and again the pin was seen. The patient was referred to the laryngologist, who introduced a laryngoscope and found a granulating area in the right pyriform fossa but was unable to extract the pin. At a later date an incision was made in the neck and the pin was successfully removed.

There were 1,805 admissions to hospital during the year (824 Europeans and 981 non-Europeans). 17 cases were admitted twice during the year, and 37 other cases admitted in previous years were again admitted in the year under review.

The average number of patients in hospital per diem for a series of years is as follows:—

1923-24 1924-25 1925-26 1926-27 1927-28 1928-29 1929-30 1930-31 1931-32 125.5 $62 \cdot 9$ 69.6 $107 \cdot 7$ 151.7 $156 \cdot 2$ $159 \cdot 1$ $204 \cdot 3$ 1932-33 1933-34 1934-35 $245 \cdot 3$ $256 \cdot 7$ $263 \cdot 4$

Table 1.—Number of Cases treated at the City Hospital for the period July 1st, 1934, to June 30th, 1935, classified according to Race, Sex and Disease.

	Total	Lovai.	4,088 17,059,44 1,059,44	2,567 3,467 316 364	121	7,360	96,184	
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Under Treatment, July 1st, 1934.		Ä.	8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	PH 1 1	I 	က	80	
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9	(ultimate diagnosis).		Enteric fever Scarlet fever Diphtheria Erysipelas Puerperal fever Gonorrhaeal ophthalmia Cerebrospinal fever Gonorrhaeal ophthalmia Cerebrospinal fever Acute anterior poliomyelitis Infective encephalitis Anthrax Anthrax Malta fever Influenzal Influenzal preumonia Pleurisy Pulmonary tuberculosis Tubercular meningitis Tubercular pands Abdominal tuberculosis Tubercular glands Abdominal tuberculosis Miliary tuberculosis Miliary tuberculosis Miliary tuberculosis Miliary tuberculosis Miliary tuberculosis Scarlet fever and Diphtheria Scarlet fever and Miliary tuberculosis Diphtheria and Miliary tuberculosis Diphtheria and Miliary tuberculosis Diphtheria and Measles Diphtheria and Whooping cough	 rhæa 	:	Table		
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			Purple Britain	Syphi Gono Syphi Syphi Soft (Dip	Other Diseases (See		
						1		

TABLE 2.—OTHER ADMISSIONS (SEE "OTHER DISEASES," TABLE No. 1)—MOSTLY CASES ADMITTED WRONGLY DIAGNOSED AS CASES OF INFECTIOUS DISEASES.

Disease.	Treat July	nder tment, 7 1st, 134.		Admit	tted.	D	ischa	rged	•		D	ied.		Tre Jui		nent, 80th,	Total Cases Ad-		Day	Units	٠.	
(Ultimate Diagnosis.)	м. Е.	M. F.	M. I	E. F.	о. Г.	M.	F.	м.). F.	M.	F.	M.C). F.	M.	F.	О. м. F.	mit- tcd.	M.	E. _F .	M.). F.	Tota
Abortion Abscess, lung	= =		-		 1 1	-	1	-	-	-	-	<u>-</u>	- 1				$\frac{1}{2}$	-	8 -	7	94	10:
Abscess, pulmonary	- -		1	-	1 -	- 1	_	_	-	1	-	1	=	= =		= =	1 1	$\frac{1}{2}$		2 -	=	24
Anaemia, splenic	= =		-	-	 1 - 1 -	-	- 2	1 1	=	_	=	_	-				$\begin{array}{c c} 1 \\ 1 \\ 4 \end{array}$	16	102	10 42	=	10 10 14
Appendicitis Asthma Bronchiectasis	3 =		-	-	- 1 	_	-	_	1	Ξ	-	=	-	- 1 - 1			1 1	=	102	42	30	30
Bronchiectasis Bronchitis Broncho-pncumonia		1 -	$\frac{2}{2}$	1	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	1	1 1	5	$\frac{1}{2}$	- 1	- 1	- 1	- 3	1 -			9 12	34	11	211 98	61	317
Cancrum oris	ΞΞ		1	-	- 1 	-	-	-	-	1	-	_	1			 	1 1	8	-	98	74 18	18
Carcinoma of lung	= =	1 -	Ê	-	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	_	- 1	1	_ 1	-	-	_	-	= =			1 3			61 54	-	279
Dementia praecox	= =	Må El	=	-	1 - 1	_		_	1	=	-	=	-			1 –	1	=	40 - -	11	197	1 1
Dentition			1	-	1 1	1	-	1	1	=	-	_	-	1 -			3	13	=	3	12 49	65
Dysentery, amoebic			1	_		1	-	_	-	_	-	=	_				1 1	15			_	1
Empyema	= =	- 1	3	-	1 - 3 2 	2	~	1 1 -	3	_	-	_	_	1 -		2 -	8	60	-	79 331	135	526 526
Endocarditis, septic		- 1	2	-	1 1	1	- 1	2	1 5	1	1 -	1	1	_ =		 	1 4	23	12	1	79	103
Fibrosis of lung Foreign body in larynx			1	-	3 5	1	_ _	_ _ _	- -	_	-	_	_	= =		1 -	10	8 24	22 -	121	407 -	558 25
Furunculosis of face Gangrene of lungs			-	-	- 1	1 -		_	=	_	-	_	1				1 1	9	_	_	18	18
Glandular fever			_		1 – 1 –	_	_	1 1	-	_	-	_	" =				1 1	_	_	19 21	_	19
Haemoptysis of undetermined origin			1		1 -	1	_	_	-	_	-	_	_		. :	1 -	2	48	_	20	_	68
Herpes		= =	1 -	-	- 1	1 -	_	-	_	_	-	_	1				1 1	4	_	_	- 16	16
Hyperpiesis Hysterical fits		1 -	1 -	-	1 - 1	1 -	-	1 -	1	_	_	1	_				$\frac{2}{1}$	6	_	61	11	67
Impetigo			1	1		- 1	4 1	-	_	_	-	_	_				$\begin{array}{c} 4 \\ 2 \\ 2 \end{array}$	13	8 19		_	32 78
Laryngitis Malaria			1 1	_	1 -	1 1	_	1 -	_	_	-	_	_				$\frac{2}{1}$	42 16	_	36	_	78 16
Malnutrition Maramus			_		- 1 1 -	_	_	1	_	_	-	_	_		: :	- 1	1 1		_	110	26	110
Meningismus Meningitis, pneumococcal	1 -		2 -		$\begin{array}{ccc} 1 & 1 \\ 2 & 3 \end{array}$	3 -	_	1 -	1	_	-	2	3	<u> </u>			4 5	26	_	12 2	20 6	58
Meningitis, septic Meningitis of unknown actiology	- <u>-</u>		_	1	3 1 - 1	_	$\frac{-}{2}$	_	1	_	-	3	1				4 2	_	- 28	8	3 16	1 ¹
Moniliasis of throat Myocardial degeneration			1 -		 - 1	1 -	_	_	-	_	1	_	- 1				1	19	6	_	25	31
Nephritis Oral sepsis			2 -	_	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	1 -	_	_	- 1	1 -	-	3	2				2 7 1	50	-	11	3 16	64
Otitis media Pericarditis			-	- 1	 1 -	-	1 -	_	-	_	_	1	-				1 1	=	3	26		16 3 26
Prematurity Psoriasis			_	-	<u>1</u> –	_	- 1	_	_	-	-	î -	-				1 1	-	19	1	=	19
Pulmonary atelectasis Purpura			_	-	1 - 1 -	_	-	_ 1	_	_	-	_	-			L -	1 1	_	-	32 17	-	32 17
Pyelitis Pyrexia of unknown origin			7	-	$\begin{array}{ccc} \hat{3} & - \\ 6 & 2 \end{array}$	7	- 4	3	- 2	-	_	_	-				3 19	-	34	85 76	- 41	85 265
Quinsy	 - 1		1 _	1		1 -	1 1	-	_	~	-	_	-		1		2	114 5	12 2	-	41	17
Rheumatic fever			-	_	- 2 - 1	-	_	_	- 1	_	-	_	-	= =		- 2	2	_	-	_	56	56
Rickets			-	1	- <u>î</u>	_	_	_	1	_	2.	_	-				1	_	_	_	$\begin{array}{c} 34 \\ 45 \end{array}$	34 45
Septic foot			1	-	1 -	_	-	1	-	-	-	_	_				1 1	-	5 -	9	_	9
Tetanus	1 -		1	1	8 3	1	1	4	1	- 1	-	3	2	= =		i –	12	$\frac{1}{3}$	35	161	- 64	263
Tonsillitis Toxic cruption	- 2		19 2	26 1		18 2	26 3	8	14	-	-	_	_	1 2		3 -	70	521	595	297	489	1902
Tumour, ccrebral			-	1	1 -		-	_	-1	-	1	_	_		-		6	3 -	$\begin{array}{c} 17 \\ 26 \end{array}$	11	_	$\begin{array}{c c} 31 \\ 26 \end{array}$
Non-Venereal cases in V.D. Ward	1 -	- 1	8			9	1	19	14			1				_	1	_		1] 1
No apparent disease		- î	3	1 1	1 1	3	1	$\begin{array}{c} 12 \\ 1 \\ \end{array}$	14 2	_	-	_	-				34 6	212 16	1 1	378 64	359 78	950 159
TOTALS	3 4	3 4	71	59	86 72	63	54	60	55	7	5	19	17	4 4	10) 4	288	1,348	1,041	2,489	2,482	7,360

E-Europeans. O-Others, or Non-Europeans.

TABLE 3.—Cases Admitted with Incorrect Diagnosis.

Admitted for—			-			-			S	но	WIN	rg 1	Ult	IMA	TE	Di	IAG	NOS	sis.					
Acute anterior poliomyelitis Cerebrospinal fever (suspected) Chicken pox Diphtheria (suspected) Diphtheria (suspected) Diphtheria carrier Enteric fever Enteric fever (suspected) Erysipelas Infective encephalitis Infective encephalitis (suspected) Influenza Measles Plcurisy Pneuronia, influenzal Puerperal fever Scarlet fever Abdominal tuberculosis Tubercular meningitis Tubercular meningitis (suspected) Miliary tuberculosis Pulmonary tuberculosis (suspected) Typhus fever Venereal disease Diphtheria and Enteric fever (suspected) Diphtheria and Enteric fever (suspected) Diphtheria and Pneumonia Enteric fever and Cerebrospinal fever (suspected) Pneumonia, influenzal and Pulmonary tuber-	Disease.		Abortion.	Abscess, lung.			long	Anaemia, splenic.	Aneurysm.	Appendicitis.	Acthma Acthma	Bronchiectasis.	Bronchitis.	Broncho-pneunionia.	Cancer.	Cancrum oris.	Cardiac failure.	pinal			Dermatitis.	Diphtheria.	-	Drug eruption.
Totals 1 2 1 1 3 1 1 4 1 1 1 9 12 1 1 1 1 3 1 1 3 1 3 1	Acute anterior poliomyelitis Cerebrospinal fever Cerebrospinal fever Cerebrospinal fever (suspected) Chicken pox Diphtheria Diphtheria (suspected) Diphtheria carrier Enteric fever Enteric fever (suspected) Erysipelas Infective encephalitis Infective encephalitis (suspected) Influenza Measles Pleurisy Pneumonia, influenzal Puerperal fever Puerperal fever Scarlet fever Abdominal tuberculosis Tubercular meningitis Tubercular meningitis Tubercular meningitis Pulmonary tuberculosis Pulmonary tuberculosis Pulmonary tuberculosis Pulmonary tuberculosis Oual Cases Dual Cases Diphtheria and Enteric fever Diphtheria and Pneumonia Enteric fever and Cerebrospin pected) Pneumonia, influenzal and Pul	(suspected) can be described as a second se			1	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	111111111111111111111111111111111111111		4				3 3 3				111111111111111111111111111111111111111	211	_				

						Sно	WING	Uı	LTI	LAM	Œ	DIA	GNO	SIS	3.						
Disease.	Dysentery, amoebic.		Empyema.	Endocarditis, septic.	Enteric fever.	Enteritis.	bod X	Furunculosis of face.	Gangrene of lungs.		Gonorrhoeal ophthalmia.	Haematuria.	Haemoptysis of undetermined origin.	Herpes.	Hydatid cysts.	Hyperpiesis.	Hysterical fits.	Impetigo.	Infective encephalitis.	Influenza.	Jaundice.
Diphtheria carrier Enteric fever Enteric fever (suspected) Erysipelas Infective encephalitis Infective encephalitis (suspected) Influenza Measles Pleurisy Pneumonia, influenzal Puerperal fever Puerperal fever Puerperal fever Abdominal tuberculosis Tubercular meningitis Tubercular meningitis Tubercular meningitis (suspected) Miliary tuberculosis Pulmonary tuberculosis Pulmonary tuberculosis (suspected) Typhus fever Venereal disease Dual Cases— Diphtheria and Enteric fever (suspected)	ed)			-	- 2 			1		1	1			1		1		4	111111111111111111111111111111111111111		11
Typhus fever and Enteric lever (su		1 1	7	1 4	5	910	0 1	- 1		1		1	2	1	1	2	_ 1	4	1	3	_ _ 1

TABLE 3.—CASES ADMITTED WITH INCORRECT DIAGNOSIS—(continued).

Admitted for— Acute anterior poliomyelitis Cerebrospinal fever Cer		SHOWING ULTIMATE DIAGNOSIS.	
Acute anterior polionyelitis Cerebrospinal fever Cerebrospinal fever (suspected) Chicken pox Diphtheria . Diphtheria (suspected) Diphtheria (suspected) Enteric fever Enteric fever (suspected) Erysipelas Infective encephalitis Infective encephalitis (suspected) Influenza Measles Pleurisy Pneumonia, influenzal Puerperal fever Scarlet fever Abdominal tuberculosis Tubercular meningitis (suspected) Miliary tuberculosis Pulmonary tuberculosis	Disease.	Malnutrition. Mata fever. Marasmus. Measles. Meningitis, pneumococcal. Meningitis, septic. Meningitis of unknown actiology. Moniliasis of throat. Myocardial degeneration. Nephritis. No apparent disease. Oral sepsis. Othis media. Pericarditis. Pericarditis. Preurisy. Cylexia of unknown origin Quinsy. Rheumatic fever.	
Enteric fever and Cerebrospinal fever (suspected) Pneumonia, influenzal and Pulmonary tuberculosis. Typhus fever and Enteric fever (suspected)	Acute anterior poliomyelitis Cerebrospinal fever Cerebrospinal fever (suspected) Chicken pox Diphtheria (suspected) Diphtheria (suspected) Diphtheria carrier Enteric fever Enteric fever (suspected) Erysipelas Infective encephalitis Infective encephalitis (suspected) Influenza Measles Pleurisy Pneumonia, influenzal Puerperal fever Abdominal tuberculosis Tubercular meningitis Tubercular meningitis Tubercular meningitis Pulmonary tuberculosis Pulmonary tuberculosis Pulmonary tuberculosis (suspected) Typhus fever Venereal disease Dual Cases— Diphtheria and enteric fever (suspected) Diphtheria and Pneumonia Enteric fever and Cerebrospinal fever (suspected) Pneumonia, influenzal and Pulmonary tuberculosis Pulmonary tuberculosis (suspected) Diphtheria and Pneumonia Enteric fever and Cerebrospinal fever (suspected) Pneumonia, influenzal and Pulmonary tuberculosis.		2

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								SH	OW	VIN	G 1	UL	CIM	AT:	ΕI)IA	GN	OSIS	S.			
				al.						}					-					ual	Cases	
Disease.	Phinitis.	Rickets.	Scarlet fever.	Septicaemia, staphylococcal	Stomatitis.	Syphilis.	Tetanus.	Thrombosis.	Tonsillitis.	Toxic cruption.	Tumour, cerebral.	Tuberculosis, pulmonary.	Tuberculosis, meningeal.	Tubercular bones & joints	Tuberculosis, abdominal.	Tuberculosis, generalised.		,	Diphtheria and Scarlet fever.	Diphtheria and Miliary tuberculosis.	Scarlet fever and Measles.	Total.
Admitted for— Acute anterior poliomyelitis Cerebrospinal fever Cerebrospinal fever (suspected) Chicken pox Diphtheria (suspected) Diphtheria (suspected) Diphtheria carrier Enteric fever Enteric fever (suspected) Erysipelas Infective encephalitis Infective encephalitis (suspected) Influenza Measles Pleurisy Pneumonia, influenzal Puerperal fever Puerperal fever Puerperal fever Puerperal fever Abdominal tuberculosis Tubercular meningitis Tubercular meningitis (suspected) Miliary tuberculosis Pulmonary tuberculosis Pulmonary tuberculosis Pulmonary tuberculosis Pulmonary tuberculosis (suspected) Typhus fever Venereal disease Dual Cases— Diphtheria and Enteric fever (suspected) Diphtheria and Measles Diphtheria and Pneumonia Enteric fever and Cerebrospinal fever (suspected) Pneumonia, influenza and Pulmonary tuberculosis				-	1	1 2 2		1	64		11	3 - 3	1		1		1		1	1	4	1 58 10 4 92 3 2 58 8 7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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Table 4.—Number of Persons treated in the City Hospital, for the Period July 1st, 1934, to June 30th, 1935, classified according to the Wards of the City, etc., to which they belonged.

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Wards, etc.	1	Е		0		E	0		F	G)		E	()		E		0	mitted Persons	E		0		Total.
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1. Sea Point 2. Harbour 3. West Central 4. Kloof 5. Park 6. East Central 7. Castle 8. Woodstock 9. Salt River 10. Mowbray 11. Maitland 12. Rondebosch 13. Claremont 14. Kalk Bay 15. Wynberg Langa Location N'dabeni Location Not Allocated From Ships From Outside the Municipality Totals	1 2 2 8 9 3 - 8 8 5 3 2 2 - 1 9	5 2 1 6 3 1 12 6 8 8 4 2 4 1 2 - - - - - - - - - - - - - - - - - -	1 2 4 4 4 15 4 6 4 5 5 3 3 2 - 3 1 7 80	1 5 3 4 4 1 14 9 3 3 5 3 6 8 8 5 7 7 1 1 7 8 8 8 4	29 22 6 27 40 33 8 8 36 47 17 23 9 16 6 15 - - 4 13	48 5 27 34 31 2 53 41 32 23 13 17 9 27 - 1 4	7 19 13 27 1 44 38 27 18 27 28 44 20 16 28 16 4 6 2 7 4 4 4 39 5 7		25 16 6 25 40 29 7 35 46 16 23 8 12 2 16 - 3 12 47	20 43 32 18 35 24 35 32 24 13 16 8 20 - 1 4 36	9 24 1 36 28 20 6 5 18 35 17 10 19 9 3 6 2	9 22 166 8 61 35 29 23 31 11 23 37 24 20 34 8 2 2	4 2 5 5 1 7 3 1 2 2 1 2 3 7 1 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	5 2 1 2 1 3 5 2 3 1 1 2 1 3 7 7	-7 5 7 -1 14 15 8 10 5 9 9 3 3 5 4 5 1 1 1 -1 1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -	5 3 3 6 1 17 16 4 6 10 11 11 9 4 11 11 11 11 11 11 11 11 11 11 11 11 1	5 4 -5 4 6 1 2 6 5 1 1 5 2 4 -1 1 3 5 6 6 6 7 1 1 1 3 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5 2 8 4 7 10 10 5 2 1 3 1 6 - - - - 6	2 2 3 3 - 8 10 3 8 1 6 5 3 3 5 2 - 2 1 8 7 7 2	1 4 -3 3 1 14 7 5 3 3 1 4 4 6 6 1 5 	65 115 40 112 84 186 97 151 133 65 105 110 87 56 113 24 6 11 19	1,863 688 494 1,507 3,195 1,246 384 2,790 1,862 1,477 1,288 304 1,213 165 1,208 - - - - - - - - - - - - - - - - - - -	1,172 1,337 80 851 2,053 1,584 216 3,076 2,313 1,568 1,067 812 1,086 761 1,055 - 50 8 1,702 20,791	314 901 665 1,578 43 4,190 2,634 1,622 1,607 445 1,730 2,274 1,576 632 1,100 368 170 899 118 3,778	501 1,150 679 1,582 211 4,869 2,101 1,612 1,507 620 1,272 2,049 1,660 1,072 2,030 230 46 - 3,342 26,533	3,850 4,076 1,918 5,518 5,502 11,889 5,335 9,100 7,289 4,110 5,357 5,439 5,535 2,630 5,393 5,98 216 1,370 400 10,659 96,184

. E-European.

O-Others, or Non-European.

CITY ISOLATION HOSPITAL, RENTZKIE'S FARM.

This hospital is situated at Rentzkie's Farm, in the Maitland Ward, about six miles from the centre of the City, and has 42 beds. It is primarily intended for smallpox, plague and typhus fever, and there was no resident staff except the caretaker, with labourers.

The hospital has accommodation available should an epidemic of any infectious disease assume large proportions, and serves as an overflow when the City Hospital wards are unable to take any cases of the more common infectious diseases. In addition, the Union Government own buildings containing 163 beds at Rentzkie's Farm for use in quarantining passengers and crews of ships entering the Port of Capetown with formidable epidemic diseases on board.

Owing to pressure on the diphtheria accommodation at the City Hospital, Portswood Road, the scarlet fever block there was evacuated and made available for cases of diphtheria, and the scarlet fever patients in the block, nine in number, were transferred to Rentzkie's Farm Hospital, which was opened for the purpose on 5th July, 1934. These were eventually discharged to their homes.

Four cases of scarlet fever were admitted to Rentzkie's Farm Hospital direct. Two of them were discharged to their homes, and the remaining two were transferred to the City Hospital, Portswood Road, on 22nd August, 1934, when Rentzkie's Farm Hospital was again closed.

In the tables on the next page are set out the number of cases classified as to race and sex and also for the wards of the City to which they belonged.

NATIVE HOSPITALS, LANGA AND N'DABENI.

The natives resident at the Council's Locations at Langa and N'dabeni are provided with free medical attention. At Langa there is a modern hospital of 24 beds and out-patient department, and at N'dabeni a branch out-patient department (closed since the end of the year under report). The native residents are also visited in their homes by a nurse or medical officer if required.

The matron resides at the Langa Hospital with a European sister and has on her staff two native nurses (general or midwifery trained) at Langa and one at N'dabeni, and three native male orderlies (untrained) at Langa.

These hospitals are under the control of the Medical Superintendent of Hospitals, who visits once a week or more often if required; and one of his house physicians attends daily either at Langa or N'dabeni, and at any other time when required in connection with urgent cases.

The activities of these hospitals in the year ended 30th June, 1935 are shown by the following figures:—

	Langa.	N' dabeni.
Daily average number of in-patients	13.38	
In-patients admitted	259	
Number of new out-patients	2,807	241
Number of attendances by out-patients	12,030	3,788
Number of visits to patients at their homes by:		
Doctor	630	147
Nurse	1,380	502

Cases Treated in the City Isolation Hospital, Rentzkie's Farm for the period July 18t, 1934, to June 30th, 1935.

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TABLE 6.		WARDS, ETC.		1. Sea Point	5. Park	6. East Central	Woodstoek	9. Salt River	13. Claremont	15. Wynberg	Langa Location	
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Of the 13 patients recorded as admitted, 9 (3 European males, 4 European females and 2 non-European females) were transferred from the City Hospital. Portswood Road, and 4 (1 European male, 2 European females and 1 native female) were admitted direct from their homes.

E — Europeans.

O — Others, or non-Europeans.

TABLES.

WARDS

AND

AGE-GROUPS

SEX,

RACE.

CAUSES.

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AS

MEDICAL OFFICER OF HEALTH. THE

Deaths of European Capetown Residents which (52 weeks ended 28th June, 1935. in the sections for wards. shown separately. for age-periods but not are excluded from the Table proper and Municipality (Inward Transfers) are included in the sections YEAR ARRANGED non-Residents (Outward Transfers) DEATHS FOR THE of the WIL Deaths in Capeto occurred outside TABLE A.

25 20 20 00 200 230 14 3 Deaths in Capetown of Residents (Excluded from foregoing eolumns). 138 148 286 $\frac{11}{22}$ 23 19 $\begin{array}{c} 12 \\ 37 \end{array}$ M. 1,639 3,350 55 2.290 | 4.989 $\begin{array}{c} 26 \\ 31 \end{array}$ 86 13 115 118 122 474 364 163 836 Per-220 939 93 74 $\frac{19}{28}$ 17 16 36 30 ಛ TOTALS 5142 64 358 47 199 57 197 164 111 2.699 907 9 62 60 19 105 99 $\begin{array}{c} 68 \\ 231 \end{array}$ 65 014 ¢4 C1 67 $\begin{array}{c} 82\\ 44\\ \end{array}$ 31 125 485 Ħ 20 84 61 85 and upwards 1 01 1 <u>د</u>ر ا 25 O N 160 120 40 252 ∞ 17 75 to 85 4 162 15 53 40 ा ा Ħ. 132 86 10 51 12 14 65 to 75 10 AGE-GROUPS: CORRECTED FOR INWARD AND OUTWARD TRANSFERS IN THE CASE OF EUROPEANS BUT CORRECTED FOR OUTWARD TRANSFERS ONLY IN THE CASE OF NON-FUROPEANS. 323 227 96 20 13 10 50 16 10 13 33 H 110 89 199 - 69 03 03 16 00 33 157 400 1,-55 to 65 -181 135 15 10 ೧೦ 68 $\frac{17}{22}$ 14 6 13 21 Z. 69 174 00 10 333 35 to 45 | 45 to 55 13 g 10 9 F $\frac{99}{183}$ 282 1 1 ಅಣ 1 1 38 28 48 88 00 10 ∞ ∞ \mathfrak{D} 17 Z 156 50 ကက 70 125 C1 -1 001 ∞ 21 Œ 198 $\begin{array}{c} 52 \\ 146 \end{array}$ 9 Z 180 44 136 12 50 25 to 35 47 184 22 32 Z 1 1 52 120 to 25 24 130 1 - 1== $\frac{34}{96}$ ಸ್ ಪ O 15 H. . 13 6 8 1-1 01 00 15 30 F 20 014 $\frac{9}{26}$ 0.1 014 0100 Ħ. 10 57 1 1 99 $\frac{1}{13}$ 12 10 Ē භ **ସ** I - I**t**0 1.1 $\frac{17}{59}$ ಬ ಬ çç 37 M $\frac{92}{774}$ $\frac{1}{10}$ 210 36 22 $\frac{17}{283}$ 17 12 14 [73 压 Total under 5 105 97 12 $\frac{19}{310}$ $\frac{18}{204}$ O 17 $\frac{22}{177}$ ĭ 137 ${\bf I} = {\bf I}$ 3 10 101 17 61 5 ⋍ 20 $\frac{24}{139}$ 1.1 ಚಿ 3 13 M. 0.1 13 193 1 01 55 79 21 00 됴 ¢1 00 17 64 C1 60 200 3 H 12 36 H 01 12 61 E 912 5 105 91-6 13 9 0 HO. 10 щÓ 0 Pio 0 Pio, EiO. щÓ Ħ 0 Ħ 0 Ħ EO. щÖ Ħ 0 PiO E)O 闰 EO. Race. XV.—Diseases of Early Infancy Skin IX.—Diseases of the Digestive Diseases Bones III.—Rheumatism, Diseases of Nutrition, of Endo-erine Glands and Other VIII.—Diseases of the Respiratory System ... X.—Non-Venereal Diseases of the Genito-Urinary System and Annexa... XI.—Diseases of Pregnancy and Puerperal State ... XIV.—Congenital Malforma-I.—Infectious and Parasitic Diseases ... Other IV.—Diseases of the Blood and Blood-Forming Nervous Loco-Sense Cireula-XII.—Diseases of the Sl and Cellular Tissue CAUSE OF DEATH V.—Chronic Poisonings General Diseases XIII.—Discases of the and Organs of II.—Malignant and Tumours VI.—Diseases of the System and Organs . VII.—Discases of the tory System . XVIII.—Ill-defined Disc XVII.—Deaths from V E. - Ritt SUMMA Totals, all Races and B Organs System XVI.-Old Age

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	CAUSE OF DEATH.		I.—Infectious and Parasitic Diseases	I.—Malignant and Other Tumours	-Rheun of N	crine Glands and Other General Diseases	IV.—Diseases of the Blood and Blood - Forming Organs	V.—Chronic Poisonings	VI.—Diseases of the Nervous System and Sense Organs	VII.—Diseases of the Circulatory System	II.—Diseases of the Respiratory System	IX.—Diseases of the Digestive System	X.—Non-Venereal Diseases of the Genito-Urinary System and Annexa	XI.—Diseases of Pregnancy and Puerperal State	XII,—Diseases of the Skin and Cellular Tissue	II.—Diseases of the Bones and Organs of Locomotion	V.—Congenital Malformations	XV.—Diseases of Early Infancy	XVI.—Old Age	II.—Deaths from Violence	XVIII.—Ill-defined Diseases	Totals	Totals, all Races
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004	4	Relapsing Fever	{E. O.	-	=	-	-	-	-		-	-	-	-	_	-	-	-	-	-	-	-	-	-	_	_	_	-	-	-	-	-	-	-	-	_
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034	27	Tuberculosis of Other Bones and Joints	CE.		1 — —	-	-	_	-	_	_	- 2	_	1 01	-	-	-	-	-	-	-	-	-	-	-	=	-	=	_	=	-	4	-	-4	-	-

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035	28	I. (cont.) Tuberculosis of Skin & Subcutaneous Tissue	{E.	-	_	_	- -	=	=	-	-	-	-	-	- -	_	-	-	-	-	_ -		=	-	-	-		-	-	-	-	-
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037	30	Tuberculosis of Genito- Urinary System	E O		-	-	-	- -	=	-	-	-	-	-	-	_ -	-	-1	-	-	- :	- -	-	-	-	-		-	1 -	-	-	-
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122	55	Non-malignant Tu- mours: Other Sites Tumours of Undeter-	CH	g.	-	-	-	-	-	-	_ .	- ·	- - - -	- -	-	- 1	- 1	1		-	1	-	1	1	1	- -	-	-	1	1	5	4 2
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106	50	Cancer of the Breast		-	6	-	1 -	-	-	3		2 -	2	2 -	= 1	-	1 -	. - . 1	-	2	-	L -	1 1	- :	2	: =	2	_ 2	- 25 - 5	25 5
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108	52	Cancer of the Skin	{E. O.	1	-	-		_	-	_	_	1 -	-	_	_ :	-	-	1 -	-	-		-	-		-	- -	 - 		2 1	3
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		III. RHEUMATISM, DISEASES OF NUTRITION, OF ENDOCRINE GLANDS AND OTHER GENERAL DISEASES.																												
149	56	Rheumatic Fever	{Е.		-	-	1 -	1	1 1	2	- :	- -	4 3	3 2	2	_1	1 -	1 2	2 -	-		2 1	-1	-	$\begin{bmatrix} 1 & 1 \\ 2 & 1 \end{bmatrix}$	- 1	-	1 -		9 28
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151	57	Chronic Rheumatism	{E.	-	-	-	- -	-	-	_	_	- -	=	-	-	-	- -	-	-	-		1			1 - :	- -	_	- 1 	- 2 1 -	2 1
152	58	Gout	{E, O.	-	-	-	-	-	-	-	_	_	=	-	=	-	- -		-	-		_				- ₁ -	-			_
153	59	Diabetes	{E.	3	3	1	_ _	-	2 2	4	-	3	1 2 3	2 -	_1	3	2 -	- 2 1 1	2 1	2	1 _	2 -	1 -	4	$\begin{bmatrix} 2 & 1 \\ 1 & - \end{bmatrix}$	3 -	1 1 4		17 28 8 10	
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155	61	Beri-Beri	{E 0		-	-	_ _	-	-	_	-	- -	-	-	_	-	- :	- -	-	-		-	-		-	-	=			_
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158	64	Osteomalacia			-	-		-	-	-	-	_	: =	-	-	=	-	-	-	-		-	_			_ _	-			
159	65	Diseases of the Pituitary Gland	SE		-	-	_ -	-	-	_	-	_ -			-	-	-	_ _		-		- -	_	-		_ -	_			-
160	66a	Simple Goitre		. –	-	_		- -	-	_	-	_	- -	=	_	-	-	- -	-	<u>-</u>			-	1	- -	_ -	-			1
161	66b	Exophthalmic Goitre		g. –	-	_	_ -		_	_	_	_ :	- -		- 1	_	-	- -		-		- -	_		- -	_ _	-			1 1
162	660	Myxœdema, Cretinism) E	g., –	-	-	-	- -	_	_	-	_			_	-	_	_ _	- 1	 - -		_ _	_	-	- -		-		1 -	1 -
163	660	Tetany		E	_	-	-	_ _	_	_	-	_ :			-	-	-			_	- :		-	_	- -	- -	-			1 1
164	66	other Diseases of the			-	-	-	- -	-	-	-	_	- -	- -	-	-	-	- -		-	-			-	-		-	_ -		m150
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165		Diseases of the Thymus Gland	. 150	0	-	-	-	- -	-	-	-	-	_ -	- -	-	-	_		- -	-	-	_ _	2 -	_	- -		-	1	2 -	2 1 1
166		Diseases of the Adrenals (Addison's Disease		1		-	-	- -	-	-	-	-	-	- -	-	-	- 1	-	- -	1	-			_	- -	- -	- -		-	1 1
167	69	Other General Disease	150	-		-	-	- -	-	-	-	_				1 -	-			-	-		1	2 4	5 3		-	2 -	2 30 4	$\frac{1}{2}$ $\frac{1}{72}$
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200		IV. DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS. Purpura	{E	. 1	- -	-	-			1 1		- 1	-	-		-	-	-	-	- :	- :	-	-	-	1 1		-	-	-	-	1 -	1 2	_ 1	-
201	70b	Haemophilia	E O	: -	-	-	-	-	-	-	-	=	_	=	_	=	-	-	-	-	- :	- -	-	-	-	-	-	-	-	_	- -		-	-
202	71a	Pernicious Anaemia	E O		1 -	-	_	\ -	=	-	1 -	- 1	-	=	-	-	-	-	-	-	1	- -		1 -	-	-	-	- ;	-	-	3	1 2	- 1	Ξ
203	71b	Other Anaemias and Chlorosis	{E		-	=	_	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1 -	: -	-	_	-	_	- 1	-	-	1 -	-	-	_
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205	72b	Lymphadenoma— Hodgkin's Disease	$\left\{ \left\{ \left\{ 0\right\} \right\} \right\} \right\}$	i. -		-		-	1 -	-	1 -	-	-	1 -	-	-	-	1	- 1	-	-	1 -	1 -	-	-	- -	-	_	-	-	2 -	3 2	- -	1
206	73	Discases of the Spleen (not due to Malaria)		.l _	- 7.	-	. -	. -		-	-	-	-	-	-	-	-	-	-	-	-	- -	- -		-	; -	-	-	-	-	_	- -	-	-
207	74	Other Diseases of the Blood and Blood- forming Organs	CE	G	-	-	- -	- -	-	-	-	-	-	-	-	-	-	-	-	-	-	-	- -	- -	-	-	- 1	_	-	-	-	- - - -	-	*_ _
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251	76	Chronic Poisoning by other Organic Sub- stances	.	E O	- -	-	- -		- -		- -			-	-	-	-	-	-	-	-	-	-	- -	-	-	_	;	_	-	-		-	-
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252t	77b	Chronic Poisoning by other Mineral Sub- stances	· K .	E	- -		_	- ·	- -	- -	- -	- -	- -		-	-	-	-	-	-	-	-	-	- -	-		_		-	-	-		-	-
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		VI. DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS	1			_							_					1 -							. _		-					1		2 _
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301		Simple Meningitis .	1	E. O.	3	2		-	-	1	3	3		- -	-		-	-	i	1	1	-	-	- -	-	- 1 -	† - -	-	-	-	4	5	9 -	-
302		Locomotor Ataxia (Tabes Dorsalis	s) \(\frac{1}{2}\)	E. O.	_	-	-	-	_	-	_	_ :		- -	-	-	1	-	-	1	-	-	-	1 .	-		-	-	-	-	2	-	2 -	2 -
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31		and Annexa Diseases of the Ear ar	id }	O. E.		- 1	-	1	-	- 1	-	- 3	_	1				1 -	-	1 -	-	-	-	_	- -		_	-	-	-		6	6	2 1
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Clas cati	sifi- on.			Wards: Corrected for Outward Transfers but not for Inward Transfers. Sea Har- Point bour tral Kloof Park tral Castle stock R iver bray land bosch mont Bay berg															Res dent	lo- ed. si- tial	тот	ALS.														
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200	70a	BLOOD AND BLOOD- FORMING ORGANS. Purpura	{E. O.	-	-	-	-	-	-	_	-	-	-	-	-	_	-	-	-	-	-	-	_ .	- -		-	-	-	_	-	1	-	-	-	1 -	. 1
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203	71 b	Other Anaemias and Chlorosis		_	=	-	-	-	_	- 1	-	-	-	-	_	-	-	_	-	-	-	-	-			=	-	-	_	_	-		_	-		1 4
204	72a	Leucaemia	{E. O.		_1	_	-	-	-	-	-	- 3	1_	-	- 2	-	-	-	-	-	-	_	 	- -		_	1	-	1	_1	_1	-	-	-	3	3 6
205	72b	Lymphadenoma— Hodgkin's Disease	1		=	-	- -	-	-	-	-	2	-	-	- 1	- 1	-	-	-	-	-	-	- :	- -	- 1	- 2	_	-	-	_	-	-	-	_	2 -	$\begin{bmatrix} 2 \\ 3 \end{bmatrix}$
206	73	Diseases of the Spleen (not due to Malaria)	1 -		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	- :	- -	_	-	_	-	_	-	-	-	-	_		-
207	74	Other Diseases of the	{ E.	-	-	-	-	-	-	-	-	-	-	- 1	-	-	-	-	-	-	-	-	- -		-	-	-	-	-	~	-	-	-	-		-
		forming Organs Totals for IV	€ O. { O.	-	1	<u> </u>		<u> </u>	-	-	1	2	1	1 3	- 3	-	-	-	-		-	-	- - - -		-		1		1	1	2	-	-	-	7	4 11
250	75	V. CHRONIC POISONINGS. Alcoholism (excluding	1			_	-	_			_				- 0	1	_	_	_	1				1 -	2			_	_		_	_ _		-	8 6	6 14
		Alcoholic Cirrhosis of Liver)	{ o.	-	-	-	-		-	-	-	_	-	-	-	-	-	-	-	-	-	-	- -	-	-	-	-	-	-	-	-	-	-	-		-
251	76	Chronic Poisoning by other Organic Sub- stances	{ Е. о.	-	-	-	-	-	-	-	-	_	-	_	-	-	-	-	-	-	-	_	- -	- - - // -	-	-	-	_	-	_	-	- :	-	- -	- -	-
252a	77a	Chronic Lead Poisoning	{E. O.	-	-	-	-		_ '	-	-	- {	-	-	-	-	_	-	-	-	-	-		\ _	-	_	-	-	-	-	-	_	-	-		-
/52b	77b	Chronic Poisoning by other Mineral Sub- stances	} E.	-	-	-	Anner	-	-	-	-	-)	-	- :	-	-	-	-	5	-	-	-	- -	- -	-	-	-	-	- (-	-	-	-	-	- -	-
		Totals for V	(O. {E. O.		_	-			- 1			-		_	_ -	1	_		-	_ _ _1	- - -	-	- -		-	_	-	-	_	-	-			-	2 -	2
		VI. DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS.	(0.				_													_ -	_				-	_		_	_		_	_		_ -		-
		Cerebral Abscess	{Е. О.	-	-	-	-	-	-	-	-	-	-	- (1	2	-	-	- !	1	-	-	- -		-	-	-	-	_	-	-		-	1	3 1	1 4
	78b	Other forms of Enco- phalitis	{Е. О.	-	-	-	-		-	-	-	-	-	-	-	-	-	-	-	-	-	- :	- -	-	_	-	-	-1	-	-	-1	_ -	- .		1 -1	2 +
01	79		{Е. О.	-	-	_	-	-	-	-	-	-	-	2	1	-	1	1	1	1	1	- .	- -	- :	ı, -	-	-	1	=	-	-1	_ -	-	-	1 2 5	3 9
102	80	Locomotor Ataxia (Tabes Dorsalis)		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-1	-	-	-	- -	- -	_	-	-	-	-	1	-	_	- -	- :	-	1 - 2 -	1 2
03 04	81	Other Diseases of the Spinal Cord	{E. O.	-	-	-1	-	-	-	-	-	-	-	1	-	1	-	1	-	-	-	1 -	- -	_	-	-	-	-	-	-	-	- -	- :	-	$\begin{bmatrix} 5 & 1 \\ 2 & - \end{bmatrix}$	6 2
05	82a 82b	(Apoplexy)	{E. O.	-	- 0	-	-	1	1	-	1	-	-	1	-	-	-	-	-	-	-	_1{ -	-	1 -	= j	-	-	1	- (-	-	2 -	- -	2	6 3 5	9 7
06		Cerebral Embolism and Thrombosis Hemiplegia	{Е. О.	-	-	-	-		-	-	-	-	_	-	1		2	-	_ [-		- .		_	1	-	-	-	-	-1	-	1 -		-	9 4	15 5
107		Other Paralyses of	{ E. O. }	-	-	-	-	-	-	-	_	-	-	-	-	-	-	1	_	2		- -	- -	_	-	-		-	-	1	_		-		1 1	2
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11	86	Infantile Convulsions (under 5 years)	(E.	-	-	-	-	-	-	-	-	- .	-	- -	- .	1 -	- -		- -	- .		- -	-	-	-	-	1	1 -	-	_		-	1 -	-	1 -	5
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13	87 bcde		{E. O.	_1	-	-	-	_	-	-	1	-			- -	- -		1 -	1 -			1 -	-	-	_	-	-	-	_	-	- -	-			3 1	4 3
		Diseases of the Eye	-	-	-	-	_	-	-	- -		- -	-	- -		- -			-					-	_	-	-	_	-	- -	- -		-	-	-	-
15	89 a b	Diseases of the Ear and	{E. O.	-	-	-	-	-	1	_ - 1 -	1 -	- -	-		1 -	-	- -	- -	-		2 - 3; -] -	_	2	-	- 1	_1	-	- -	- -	1 -	_		6 6	6 11
		Totals for VI	{E. O.	4	3	2	-	1	2	3	2 -	2 -	-	1 4	2 -	6 -	4	3 5	$\frac{2}{3}$	3 3			2 1	1	- - 6	- -	3 5	2 5	1	1 1	2 7 1	2 :	3 -	4 33	3 26 1 42	59
50		VII. DISEASES OF THE CIRCULATORY SYSTEM. Pericarditis	(F													-					1								1							0
	30	Pericarditis	{E. O.	-	-		-	- -						- -	1	1 -	- 1	1 -	-	-	1 -	-	-	-	-	1	-	-	1 -	- -	1 -	-	-	3	1	4

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Dca Class catio	sifi-						AG E	E-GR UROP	COUL	PS: VS B	COP	REC COR	TED	TED	FO	r Ou	UTW	ND OU VARD ' PEANS	TRAN	ARD T	RANS	FERS LY I	S IN !	THE (CAS CASE	E OF					тот	ALS	town	(excluded	
Code No.	International Code No.	CAUSE OF DEATH.	Race.	0 t		1 to 2		2 to 5) 1	Tota inde 5	r	5 to 10		10 t 15		25		25 to 35		5 to 45	45 t 55		55 to 65		35 to 75		75 to 85	0 7	85 and up- ward	ds	M. F	Persons.	<u> </u>	Non-Residents	
351	91	VII. (cont.). Acute Endocarditis	(E.	_	_		_		_		-	-	-	_	-	2	1				1	1	1		- :	-	-	_	-	-		2 7 15	6 -	1 .	-
352	92	Chronic Endocarditis and Valvular Disease	{ ō. ∫ E.	_	-	-	-		-	-	-	-	1	-	-	-	1		3	$\begin{bmatrix} 2 \\ 2 \end{bmatrix}$	4	3	6	2	8	9	6	5	-	- 1	27 2	28 5	58		1
353	93a	of the Heart	∫ ο. ∫E.	_	-	-	- 1	1	1 -	1	1	-	-	-	-	2	3	3 -	4 -	4 6	15	6	-	8	6 .	4	2	3	-	-	42 3	35 7' 5	7 -	1	1
354		Fatty Heart	ξo.	 	_	-	-		-	-	-	-	-	-	- -	-	-			1 -	-	- 2		1	-	_	-	-	-	-	1 -	5 - 3	1 -	1 -	-
355	93b	Other Discases of the Myocardium	ξο. {Ε. ο.	_	_	_	-	-	_	-	-	-	-	1	_	_	_	- 3	1 2	$\begin{bmatrix} 1 & 2 \\ 1 & 2 \end{bmatrix}$	6 7	3 7	18 10	10 9	22 10	12 13	24	12	4 3	10	75 5	50 12 45 8	25 35	2 1	11 2
356	94	Disease of the Coronary Arteries — Angma	E.			-	-	-	-	-	-	-	*		-	-	-		-	4 -	6		16		23	3	4	4		-	53 1	15 6 5 1	68		1
357	95 a b	Other Diseases of the Heart	{ E. O.	-	-	_	-		_	-	-	-	-	-	-	-	-	-	1 -	2 2	1 3	1 3	9 3	5	12	3 4	2	4	1	1	25 1	15 4		1 -	-
358	96	Aneurysm	{E. O.		=	-	-	-	- ·	_	-	-	_	-	_	-	-	= :		2 -	1	-	3	1	3	-	2	-	-	-	6	1	7 -	1 -	
359	97	Arterio-sclcrosis	{E.		-	=	-	-		=	-	-	-	-	-	-	-	-1 -	1 -	1 -	9 14	7 9	15 20	11 11	33 28	24 15	16 7	27	5	14	78 8 75 4	$\begin{vmatrix} 85 & 16 \\ 48 & 12 \end{vmatrix}$	53 23	9 5	2 4
360	98a	Cancrum Oris	{ E.	! <u>-</u>	_	-	-	=	-	1	1	-	-1	-	-	-	-	_ = =	- -		-	_	-	-	-	-	-	-	-	-	1	_2 -	3 -		
361	98 a b	Other Gangrene	{E. O.		-	=	-	=	_	-	-	=	_	- /	-	-	-			=	-	-	-	-	1	-	_1	-	_1	-	-3 -		3 -	1 -	-
362	99	Other Diseases of the Arteries	{E.	! =	-	_	-	-	-	-	-	-	-	-	_	-	_				-	-	-		-	-	-	-	-	-	- :	= =		. ?	
363	100	Disease of the Veins	{E.	-	- 1	-	-	-	-	-	_	-	-	Ξ	-	_	-	-	- -		-	-	-		-	-	-	-	-	-	- :				1
364	101	Disease of the Lymphatic System	{E.		-	-	=	1	_	1	-0 -	-	-	-	-	_	-	_	- -		-	-	-	-	-	-	-	-	-	-	1	- -	1 -		
365	102	Abnormalities of Blood Pressure	{E.		_	-	=	-	_ ,	-	-	-	_	-	-	-	-	- :	- -		-1	_	-	-	1	-	-	-	-	-	2 -	-	2 -	1 -	
366	103	Other Diseases of the Circulatory System	{E.	-	-	_		_	-	_	-	_	-	-	-	-	-				-	-	-		1	-	-	-	-	-	1 -		1 -	23 1	15
		Totals for VII VIII. DISEASES OF	{E.		-	1	-	3	2	4	2		2	1	2	2 4	7		9 1	$\begin{array}{c c} 9 & 7 \\ 13 & 11 \end{array}$	7 28 1 48	33	46	30	50	38	18	22	7	8 2	$ \begin{array}{c c} 277 & 19 \\ 200 & 16 \\ \hline \end{array} $	64 36	34 1	6	8
400	104	THE RESPIRATORY SYSTEM	{E	-	-	-	-	-	_	-	-	-		_		1	-	-		- -	-	-	-	_	-	_	-	_	-	-	1 :	-	1 -	-	-
401	105	Disease of the Larynx	{E O	Z	-	- 1	- 1	-	_	-	-	-	-	-	_	-	-				-	-		-	-	-	-	-	-	-	-	-1 -	2	-	=
402	106a	Bronchitis, acute	E O		6 0 ₅ 8	- 25	- 24	15	-9	90	6 91	2	1	-	-	-	-	-	1 -	2	2 -	-	-	- 1	1	4	2 2	- 2	-	-	97 1	$\begin{bmatrix} 8 \\ 19 \end{bmatrix}$	101 99	1	1
403a	106b	Bronchitis, chronic	{E	5	- 2	-	- 1	2	_	2	-3	-	_	-	-1	-	-	1	- -	1 -	2 6	-	3 2	1	4 3	1 3	3 2	_1	-	-2	12 18		15 28	1	=
403 b	106c	Bronchitis, undefined	{E O		1 - 9 13	5	- 3	-	- 2	1 25	18	-	- 2	-	- -	-	-	-		- -	-	-	-	1	-	1	-	1 1	-	2	28	3 23 5	4 - 51 -		
404	107	Broncho-pneumonia	{ E	68	7 8 69	63	3 45	2 45	31 31	13 176	9 145	3	- 8	2	1 -	3	_	1 6	1 4	1 -	2 -9	1	2	1	2 2	4 2	5	1	2	2	26 212 1	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	49 74	18	2 4
405	108	Pneumonia, lobar	{ E	5	4 12	2 3	1 2	1 1	1	3 8	1 15	1	- 1	2 1	-2	2 3	3 2	17		5 4 16 2	4 4 9	-2	11 8	2	5 1	_1	-1	1	-	-	40 64	14 28 9	54 92	3 8	1
406	109	Pneumonia, not otherwise defined	{ E). 2	1 -	3	1	-	1	1 5	-6	-	-	-	-	-	1	1		3 -	1 -	-	1	-	2	-	2	2	-	-	8 9		11 16	-	1
407	110	Empyaema	10	$\begin{vmatrix} 1 \end{vmatrix}$	1 -	1	-	-	-	1	-	-	1	-	-1	1 -6	2	1	1	4	1 -	-	-	1	-	-	-	-	-	-	1 12	1 6 1	2 18	-	-
	110	Other Pleurisy	10	j:	-	_	-	-	_	-	-	-	-	-	-	1	1	1	2	3 3	3 3	1	1	-	1	-	-	-	-	-	10	6 1	3 16	1	-
	111	Pulmonary Congestion	10). 1	1 2	-	-	-	-	1	1 2	-	-	-	-	-	_	1	-	1 -	2	1	1	1	1	-	1	-	-	-	7	5 4	6	1	-
	112	Asthma	{ E	5	-	-	1	-	_	-	1	-	_	-	-	-	-	=	-	1	1 1 1 5	3	3	-	2 2	1	1	-	-	-	12 12	8	18	-	-
	113	Pulmonary Emphysema		0. –		-		-	-	-	-	-	-	-	-	_	-	=	-		2	-	1	1	-	1	-	-	-	-	3	2	5		-
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413	114a	Miners' Phthisis (Silicosis): without Tuberculosis	13 _	E D	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	_ -		-	-	-	-	-	-	-	-	-	-	-	1	-	-
414	114a	Miners' Phthisis (Silicosis): with Tuber-		3	-	_	-	-	7 4	-	-	-	-	-	-	-	-	-	-	- -		-	-	-	-	-	-		-	-	-	-	-	-	-
		Totals for VIII			9 12 5 160	7	4 78	3 65	1 44	19	17	7 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		2 3	$\begin{array}{c c} & - \\ & 2 & 5 \\ & 3 & 13 \end{array}$		$\begin{bmatrix} 6 & 6 \\ 4 & 32 \end{bmatrix}$	5 10	9 34 1	5 9 38) 1	17 22	6	16 10	6 12	13 6	11 5	2 3	4 2	99	64 1	163 336	8	
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International	code tro.	CAUSE OF DEATH.	Race.	Sea Poir 1		Har- bour 2	- (West Cen- tra! 3	Kloon 4		ark 5	Eas Cer tra	n-	Castle 7	e st	ood- ock 8	Sal Riv 9	er	Mow bray 10	1:	ait- and 11	Rono boso 12	eh 1	lare- mont 13	t Ba	alk ay	Wy ber 15	n-g	Residentia Ad- dresse Un- ascer	8	ons,
I				М.	F.	M 1	F. N	M. F.	M. F	. M	[.] F.	М.	F.	м. F	. M	F.	M.	F.	M. F	r. M	F.	М.	F.]	M. F	. M.	F.	M.	F	M. F	м. F	Pers
91		VII. (cont.). Acute Endocarditis	ξΕ. Ο.	1	-	2	_ -	- -			1 -	- 2	- 5		-	-	-	-	-	- -	-,	-	-	-	1 -	-	-	-	- -	4	1 5
92	2	Chronic Endocarditis and Valvular Disease of the Heart	Е. О.	1	3	2	1	1 - 3 -	1 -		2 -	1 2	1 4		2 2	5 5 1		3	1	5	1 -	7	2	6 4	3 - 6 -	2	3	1 5	2	5 26 2 1 42 3	$ \begin{array}{c cccc} 7 & 12 \\ 6 & 52 \\ \hline 5 & 77 \\ \end{array} $
93	3a	Acute Myocarditis	{Е. О.	-	-	-	-	- -	1 - -		-	-	-4		_	-	-	-		_ _	-	-	-	- -	- -	-	-	_	- -	2 -	5 7
93	Bb	Fatty Heart	{Е. О.	-	-	-	-	- -	- - 1 - -		-	-	_		-	-	- 1	-	-	- -	_	-	-	_	- 1 1 -	-	-	-	_ _	1 -	
98	3b	Other Diseases of the Myocardium	{ E.		5	2 2	_	-3	$\begin{bmatrix} 2 & 6 \\ 1 & 2 \end{bmatrix}$		4 3 1 1	5	3 9	28	1 8	3 1	6 2	1 3	4	6	$\begin{bmatrix} 5 & 1 \\ 3 & 3 \end{bmatrix}$	6	1 3	11 1	10 2	2 4	4 2	5 4	2 -		19 122 15 85
94	1	Disease of the Coronary Arteries — Angina Pectoris	{ Е.	6	-	-	-	1 -	2 -	- -	6 1	2 2	-	<u>-</u> -	2	1 -		2	7	2 -	1 1	4	1	4	1 4	1 1	8	5	2 -	51 1	.4 65 5 16
95 a		Other Diseases of the Heart	{E.	2	1	3	_1			1	1 1	2 2	1	1	1 -	1 1	1 2	-	3 .	1	3 -	- 1	-4	2 2	1 -	2	2	-2	3 -		5 40 2 24
96	-	Aneurysm	{E. O.	. 1	-	-	-			1 _	1 -	- 2	- 1	 1 -		1 -	1	-	1		-		_	1 -		-	- 2	-	_ _	6 6	1 7
97	7	Arterio-sclerosis	{E. O.	. 11	16	3	-	2 -	3 8 -	9 _	$\stackrel{+}{\overset{+}{\overset{-}{\overset{-}{\overset{-}{\overset{-}{\overset{-}{\overset{-}{\overset$	1 8	1 9		2 / 9	7 8		2	7	9 -	$\begin{bmatrix} 2 \\ 4 \end{bmatrix}$		5	5 13	7 4 3 1	1 1	5	8	9	5 78 8	55 163 18 1 2 3
98	8a	Cancrum Oris	{E.		_	-	- 1	- -	1 -	_ _		-	-		- -		_	-	_	_	1 -	_	-	-		-	i	-			2 3
98 a	8	Other Gangrene	{E (O		-	-	-	- 1 -	-		- -	-			- _	1 -	2	-	_	_ _	1 -		_	_	- -	-	-	_	_ -	3 -	- 3
99	ļ	Other Diseases of the Arteries	{E O		-	-	-	<u> </u>	-	- -	- -	-	-	- -	- -	-	-	-	-	- -	-		-	_	- -	-	-	-			
100	0	Disease of the Veins	1	_	_	-	-		- -	- -	- -	-	-	-	- -	_	-	-	-	_ _	_	-	-	_	- -	-	-	-	- -	- -	
10	1	Disease of the Lym-	{E 0		-	-	-	-		- -	- -	-	_		- -	_	-	-	_	- -	_	-	-	_	- -	_	_	-			- -
10	$_{2}$	phatic System Abnormalities of Blood	{E 0			1	-	- -	- -	_ -	- -	-	_		- -	_	-	-	_	- -	-	-	-	-		-	-	-		1 -	- 1 - 1
10	3	Other Diseases of the	SE		-	-	-			_ -	- -	-	-	_	- -	-	1	_	-	_ -	_	-		_	_ _	_	-	_		1 -	- 1 - 1
		Circulatory System Totals for VII	SE	1. 28	3 25	13	2	4	2 13	14	17, 1	5 11	-6	6	4 2	5 1	$\frac{1}{5}$ $\frac{1}{24}$	9	23	23 1	0 4	17	9	29	23 1	2 10	23	19		$\frac{-}{2}$ $\frac{-}{271}$ $\frac{-}{19}$	
		VIII. DISEASES OF THE RESPIRATORY		-	-	0		1.0	7 12	-	3 3	2 23	34	27	23 1	0	9 11	10		2 1	1 12	$\frac{2}{25}$	18	25	14	5 6	3 25		6	$\frac{2 200 }{ }$	364
) 1 0)4	SYSTEM Discase of Nasal Fossac and Annexa	{ E		-	-	-	-	- -	-	 - -	-	-	-	_ -	:	-	-	-	- -		-	-	_	- - -	1 -	-	-		1 -	1 1
1 10)5	Disease of the Larynx	{ I		-	-	_ _	-	- -	_	-	-	- 1	_ L _	_ -		-	-	-	_ -		-	-	-	- -	-	- 1	-	_		1 - 2
2 10)6a	Bronchitis, acute .	{I	E. – O. –	-	1	1 2	5	- 3 - 4	- 1	1 -	1 16	3 14	1 - 5	1 -	9	2 - 9	2 9	1 4	2 1	3 19	25	24	-		-	_ 3 4	- 5	_	2 97 10	7 9 199
Ba 10	06b	Bronchitis, chronic	{[E O	1	- 1	-	-	- - 1	-	3	1 3	3 -	1 2 2	2	1	1 - 1 4	- 1	_1	_ -	2 -	3 - 2	-	2	- -	1 -	$\frac{1}{2}$	-		12	3 15 10 28
3b 10	06c	Bronchitis, undefined	$\left\{ \left\{ \left\{ 0\right\} \right\} \right\}$	E	-	- 1	2	- 2	1	-3	- -	-	-	3 2	3	- -	3 3	-4	-	-	1 -	-	_1	_	2 -	-	1 6	- 3		1	3 4 23 51
4 10	07	Broncho-pneumonia	{]	E. O.	3 3	3 1	- 1	1 9	1 1 9 16	1 8	2	1 3	- 38	8 22	_ 22 1	1 5	3 2 8 13	3 7	2 3	2 3 5	4 :	3 1 20	15	1 30	16	2 3	1 4 5 17	3		26 2 212 16	22 48
5 10	80	Pneumonia, lobar	{;	E. O	2 2	2 4	- 3	3	1 4	-1		2 1	5 2	2 1	10	9	$\begin{array}{ccc} 1 & 1 \\ 2 & 5 \end{array}$	1 2	3	2	1 -	2 5	-	2	1 3	1 -	3 5	_1		38 1	4 52 28 92
6 10	09	Pneumonia, not otherwise defined	. 5]		2 -	1	-	- 1	- -	-			1 -	1 1	- 1 -	1 -	-	1	-	- -	- -	-	2	- 1		2 -	1 1	- 2	1 -	8	3 11 7 16
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2 1	- 7-	Other Diseases of the	e 5	E		-	-	-		-	_	- -	-	-		- -		-	1	-		-,	-	-1		-	1	-	- -	2 -	2 2
	a b	Miners' Phthisis (Sili cosis): withou	- (E		-	-	-		-		- -	-	- 1				-	-		- -	-	-			-	_	_	_ ~		-
4]	114;	Tuberculosis . Miners' Phthisis (Sili cosis): with Tuber	. \ - \{	O E	- -	-	-	-		-	_		-		- -		-	-	-	- -		-	-	- / .	- -	-	-		- -		-
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		1111.	{		<u>i</u> -		8	22	$\begin{array}{c c} 2 & 6 \\ 14 & 30 \end{array}$	16	2	1 80	0 6	9 49	52	33 1	9 39	26	8	6 4	3 48	5 58	40	38 2	25 18	12	38	24	4 -	90 61 478 358	8836

Death Classification.							AG:	E-GR URO	OUP	s: ns i	Cor 3UT	REC'	TED	FOR TED	FO.	R O	UTW	ARD	OUTV TRA EANS	VARD ANSFI	TRA	NSFE.	RS II	THE	E C	ASE O	of F				тот	TOTALS		
Code No.	115 115 116 117a 117b 118 119 120 121 122a 122b 123 124a 124b 125 126 127 128 129 130 131 132 133 a b 134 a b 6 135 a b 136 a b	CAUSE OF DEATH.	Race.		0 to 1 t 2			2 to 5		Totai under 5		5 to 10		10 to		15 to 25		25 to 35		35 to 45		45 to 55		55 to 65		65 to 75		75 to 85		d d ds.		rsons.	Postelia in C	
္ပိ	Inte			М.	F.	М.	F.	М.	F.	М.	F.	M.	F.	M.	F.	M.	F.	М.	F.	М.	F. N	I. F.	M.	F.	М.	F.	M.	F.	М.	F.	M. F	- Fe	_	
450	115	IX. DISEASES OF THE DIGESTIVE SYSTEM. Diseases of the Buccal Cavity	{Е. О.	 - -	_	_	7 -	-	-	-		-		-	-	_	-	_1	-	=	- -	1 -	-	 - -	1 -	-	-	1 1	-	-	2 -	1 -	3	
451	115	Diseases of the Pharynx and Tonsiis	{E. O.	-	-	-	-	_1	1	_1	-	-	-	-	- -	1	=	-	-		- 1		-	- -	_	-	-	-	-	-	1 -	2	2 -	
152	116	Diseases of the Ocso- phagus	{Е. О.	-	- -	-	-	-	-	-	_	-	-	-	-	-	=	-	-	- -		=	-	-	- -	-	-	-	-	-		-		
153	117a	Ulcer of the Stomach	{Е. О.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1 -		1 -	2 2	1 -	1 -	-	-	-	-	-	5 -	1 6	5 5	
454	117b	Uicer of the Duodenum	{Е. О.	-	-	_	<u>-</u>	-	- -	=	-	-	-	-	- -	1 1	-	_1	-	- -		_1	-4	_1 -	-	-1	-	-	-	-	6	3 9	-	
455	118	Other Diseases of the Stomach (excluding Cancer)	{ Е. о.	1	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	- -		1 -	-	-	-	-	-	-	-	1	2 -	2	-	
456	119	Diarrhoea and Enter- itis: Under 2 years	{Е. О.	11 123	12 119	$\frac{2}{64}$	2 48	_	-	$\begin{array}{c} 13 \\ 187 \end{array}$	14 167	_	-	-	-	-	-	-		- -	_	-	-	-	-	-	-	-	-	- - 1	13 14 .87 16	27 7 354		
457	120	Diarrhoea and Enter- itis: 2 years and over	{E. o.	-	-	-	=	2 14	3 14	$\frac{2}{14}$	3 14	1	-	-	1	-	-	-	- 2		1 -	- L -	1 1	-	1	2	2	2	-	1	7 17 1	16 34	-	
458	121	Appendicitis	{E. 0.	-	_	-	=	-	-	-	-	-1	-	1	1	1	-	-2	-	-	1 -	-	1 1	2	1	-	1	2	-	-	6 5	8		
459	122a	Hernia	{Е. О.	-	_	_	_	-	-	_	-	-	-	-	<u>-</u>	-	_	-	-	- -	-	1	-	-1	-	-	2	-	-	-	2	3	-	
460	122b	Intestinai Obstruction	{Е.	1	-	-	-	-	-	1	-	1 2	-	1	- '	-	-	-1	1 2	1 -	- 2	1	1 -	1	-1	-1	-1	-	-	-	7 6	9 10	-	
461	123	Other Diseases of the Intestines	{Е. О.	-	_	_	-	-	_	-	-	-	-	-	-	-	-	-	-	1 -	-	-	_1 	-	-1	-	-	-	-	-	2 -	2 2	-	
462	124a	Cirrhosis of the Liver,	{Е. О.	- -	_	-	-	-	-	=	-	-	-	-	-	=	_	-	-	- -	- I	1 -	-	-	-	-	-	-	-	-	- 1 - -	1 -	=	
463	124b		{ Е.	-	-	-	-	-	-	-	-	1 -	-1	-	-	-	1	-	1	2 -	2	-	2	1 -	2	-	-	-	-	-	9 2 2	11		
464	125	Acute Yellow Atrophy	{E. 0.	- 1	-	-	-	-	-	- 1	-	-	-	-	-		-1	-	-	- -	-	-	=	-	-	-	-	-	-	-	- 1	1 2	-	
465	125	Other Diseases of the Liver	{E. O.	-	-	-	-	-	-	=	-	-	-	-	-	-	1	-	-	- -	-1	- 2	_1	-	-	-	-	-	=	1	2 2	2	-	
466	126	Biliary Calcull	{E. 0.	-	-	=	-	-	-	-	-	-	-	-	-	-	-	-	-	- -	-	-	1	1	2	-	-	-	-	-	3 1	4	=	
467	127	Other Diseases of the Gall Biadder and Ducts	{ Е. о.	-	-	- -	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-	1	-	-	-	-	-	-	- 1 - -	1 -	 -	
468	128	Discases of the Pancreas	{E. O.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	- -	-	-1	=	-	=	-	-	-	-	-	- _1 - -	-1	-	
469	129	Peritonitis without stated cause	{E. 0.	-	-	<u>-</u>	-	-	-	-	-	-1	-	-	-	-	-	-	1	- - - -	_ -	_		1	= \	-	-	-	-	-	1 2	3	E	
		Totals for IX	{E.	13 126	12 119	2 64	2 48	3 14	3 14	18 204	17 181	5 3	-	-3	3	2 3	2	2 3	3 7		2 8	3 4	14 6	8 2	10	4	-6	4	-	$-\frac{3}{2}$	68 4 7 31 199	115 430	1 1	
500	130	X. NON-VENEREAL DISEASES OF THE GENITO - URINARY SYSTEM AND ANNEXA Nephritls: Acute	ſE.	_	_	-	_	_	_		_	-	_	1	_		-	1	-		2 1	-	1	_	_	1		_	-	_	4	7	-	
		Nephritis: Chronic	ξō. [ξΕ.	2	3	2	2	_	3	4	8	2	-	1	1	1	-	1	5	2	$egin{array}{c c} 1 & 2 \\ 1 & 3 \\ \end{array}$	2	7	14	2 13	10	9	- 8	4,		18 1' 37 36		1	
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		Nephritis: Not otherwise defined Other Diseases of the	{E. O. }E.	-	-	-	1	-	-	-	1	-	-	1	-	-	-	1	1	1 -	2	2 -	2 2 2	2	1	1	-	1	-	-	8	14		
	a b	Kidneys and Annexa Calculi of the Urinary	{ő. ∫E.	-	1	-	_	-	-	_	1	-	-	-	-	-	-	-			-	-	$\frac{\bar{2}}{1}$	-	-	1	1	-	-	-	3 3	2 5		
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507		Diseases of the Prostate	10.	1		-	-	-	_	-	-	-	-	-	-	-	-	-	-	- -	-	-	2	-	5	-	2	-	1	-	10 -	10		
	138	Diseases of the Male Genital Organs	10.	-		-	_	-	-	-	_	-	-	_	_	-	-	-	-	- -	- -	-	-	-	_	-	-	-	-	-	- -	-	-	
		Diseases of the Ovary	(0.	. -	-	-	_	-	-	-	-	-	_	-	-	Ξ	-	-	-	- -	- -	-	-	-	-	-	-	-	-	-		-	1	
510	139a	Diseases of the Fallopian Tubes and Pelvic Abscess	{ E.		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		- -	-	-	-	-	-	-	-	-	-	- -	-		
511	139b	Diseases of the Uterus	{E	: -	-	-	-	-	-	-	_	-	-	-	-	-	1	-	2	-	2 -	-	-	-	-	-	-	-	-	-	-	1 1 5	5	
512	1390	Diseases of the Breast (non-puerperal)	{E		-	-	-	-	-	-	-	-	-	-	-	-	-	1-	-	-		-	-	1	-	-	-		-	-	-	1	1	

ath sifi- ion.				1		W	ARD	s:	Сог	REC	OTED) FO	r C)UTI	WAR]	D T	RAN	SFE	RS B	UT	NOT	FO	R II	NWA!	RD I	'RAN	SFEF	s.		1		al car Re	ot lo- ted esi-	TOT	ΓAL	S.
International Code No.	CAUSE OF DEATH.	Race.	1	int	Ha bo 2	ur	We Cer tra 3	n-	Klo 4		Par 5		Ea Ce: tr: 6	n- al	7		8	ek }	Riv 9	ve r	10	y	lan 11	d	Rond bose 12	h	mont 13	Ba 1	4	be		dres Un ase tain	d- sses n- eer- ied.	34	70	Persons.
115	IX. DISEASES OF THE DIGESTIVE SYSTEM. Diseases of the Buecal	Œ.			_	F		F.	M. 1	F.	M. 1	F.	М.	F.	M. -	F	M.	F.	<u>M.</u>	F.	M.	F.	M.	F.	M	· 1	1. F	. M	F.	M.	F.	M.	F	M. 2	1	3
115	Diseases of the Pharynx	{E. O.	_	-	-	-	-	-	-	-	-	-	-		-	-	-	-	-	-	-	-	1	_	-	- :			-	-	-	-	-	1 2	- i	1 2
116	and Tonsils Diseases of the Ocsophagus	₹0. {E. 0.	_	-	-	-	-	-	-	-	-	_	-	-	- -	1 1 1		-	-	_	-	_	-	-	-	- -			-		-	-	-	-	_	_
117a	Uleer of the Stomach	{Е.	. 1	_1	2:	-	-	-	-	-	-	-	-3	1 1	- 1	- -	- -	-	-	-	-	-	-1	-	-	_ .			-	2	-	-	-	5	1	6 5
117b	Uleer of the Duodenum	{E.	1	1	-	-	-	-	_1	-	-	1	-1	<u>-</u>	-	- -	- -	- -	1	-	=	-	-	-	-	- -	- -		-	2	_1	-	-	5	3	8 1
118	Other Diseases of the Stomach (excluding Caneer)	E o	1	-	-	-	-	-	-	-	1	-	-	-	-	-	-	- -	-	-	 - 	-	-	-	-	_	1 -	1 -	-	2	- -,	~	-	2 2 -	1	3 2
119	Diarrhoea and Enteritis: Under 2 years	{E	-	-	1 3		- 10	-6	9	2 8	-	-	1 33	$\frac{2}{24}$		- 11	1 5	3 8	4	2 6	2	1	2 9	1 12	2 35	- 32	16 2	$\begin{bmatrix} 2 \\ 0 \end{bmatrix} = \begin{bmatrix} -15 \\ 15 \end{bmatrix}$	10	- 29		-	- 1	$\begin{array}{c c} 12 \\ 187 \end{array}$	$\begin{vmatrix} 14 & 2 \\ 67 & 3 \end{vmatrix}$	26 54
120	Diarrhoea and Enteritis: 2 years and over	{E	: =	_2	1	-	1	-	-	-	_1 _	-	1 3	6		1	1 1		-3	-3	1	-1	-	2	1	2		2 -	1	3	3	-	-		17 3	
121	Appendicitis	1		1 -	-	1	1		-	-	_1	-	1	-	-	-	1	1.1	1	-	-	1	1	-	-1	1	-	1 -	-	=	-	-	1	5	5 1	10 8
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123	Other Diseases of the Intestines	(E.		1	- ¹	-	<u>-</u>	_	_	-	1 1	-	_	1	-	_	-1	-	-	-	_	- 1	1	_	-	- ·			-	-	-	-	-	1	1	2 1
124b	Aleoholie	ξō.	-	2 1	-	-	- -	-	- 1	1	- 1		-	-	-	-	1	-	1	1	-	-	-	-	-	- ·	1 ~	-	-	_	-	- 1	_	9	2	- 1 1
	Not returned as Aleoholie	lo.	1	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	-	-	-	-	-	-	1 .		-	-	-	-	-	-	2	1	3
125	Acute Yellow Atrophy	{E	. –	=	-	-	-	-	-	Ξ	_	_	1	_	-	-	-	- 1	- -	-	_	_	-	-	-	_ .		1 -	-	-		-	=	1	1 2	2
125	Other Diseases of the Liver	{E O	-		-1	-	-	-	-	-	-	_	- 1	_	-	1			_	-	-	-	-	-	-[- -	1 -		-		-		2	$\frac{2}{2}$.	2 3
126 127	Biliary Caleuli Other Diseases of the	E (E	-	-	-	-	-	_		-	-	-	-	_	-	-	-	=	-	-	-	-	-	-	-	-	1 -	_	-	-	-	-	-//	1 - -	1	1
12,	Gall Bladder and Duets	\{o	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	- -	- -	-	-	-	-	-	-	- -	- -	-
128	Diseases of the Panereas	{ E	-	=	=	-	-	-	-	_	-	-	-	-	_	- 1	-	-	-	-	-	-	-	-	-	- -	-	_		_	-	-	-		1 -	1
129	Peritonitis without stated eause	{E	·	-	-	-	_	<u>-</u>	-	_	_ 	-	-	1	-	_	-	-	1		-	-	1 -	-			-	1 -	- 2	_ 	1	-	-	1 -	$\frac{1}{2}$	3
	Totals for IX	{E O	. 1	9	5 4		13	7	6 9	5 8 —	5 - —	_2 	3 43	31	23 —	13	5 7		$-\frac{7}{9}$	6 6	2 3	2	11	15	37	36 1	8 2	4 - 6 18	11	35	29	_		31 19		
130	X. NON-VENEREAL DI- SEASES OF THE GENITO - URINARY SYSTEM AND ANNEXA Nephritis: Acute	{E.		1 1	-	- 1	- 1	-	-	-	-	-	- 2	1.1	-	- 2	- 2	_	1 2	1	1	-	1	-	_ 3	2	1 -	4 -3	1 2	-	-4	-	-		3 7 3	7
131	Nephritis: Chronie	{E.	. 8	6	1	1 1	1	- 1	1 3	5 2	-	1	1 1	1 6	- 1	- 1	2 1	5 4	6 2	-	2	4	4	-	1 3	2	2 2	3 2	3	6	5	-	2 :	37 3 22 2		1.9
132	Nephritis: Not otherwise defined	{E.	1	-	- 1	-	-1	- 1	-	1	-	1	1	- 3	-	-	2	2	2	-	-	-	-1	-	$\frac{2}{1}$.	1 -	1 -	-	-	1	1	_1	- :	10 8	6 1	6
133 a b	Other Diseases of the Kidneys and Annexa	{Е.	1	-	-	-	-	1	1	-	-	-	- 1	-	-1	-	1	-	-	-	-	2	-	-		-	-	_1	1	1		1	_	6 3	3 2	9 5
134 a b e	Calculi of the Urinary Passages	{Е. О.		-	-	-	-	-	-	-	-	-	- 	_	-	-	-	_	-	-	-	-	-	-	1 -	-	1 -	-	-	-	- -	-	-	1 -		1 1
135 a b	Diseases of the Bladder	{Е. О.	-	-	-	-	-	-	-	-	-	_	-	-	-	-	-	-	-	-	_	-	1	_		_	-	-	-	-	- :			1 -	-	1
136 a b	Diseases of the Urethra, Urinary Abseess, etc.	{E. O. €	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-1	-	-	-	-	- .		-	-	-	-	-	-]	-	-	2 -		1 2
137	Diseases of the Prostate	{E. O.		-	1	-	-	-	1	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	2 -	-	-	-1	-	4		- -	- 1	0 -	10)
138	Diseases of the Male Genital Organs	{E. O.		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	- :				-	-	-	_	-	_	- -		- -	-	-	1
	Diseases of the Ovary Diseases of the Fallo-	{ Е. О.	-	-	-	-	-	-	-		-	-	-	-	-	-	-	-	-	_	_ -		- -		-	-	-	-	-	_ .	- -		- -		-	
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	Diseases of the Uterus	{Е. О.	-	-	-			-	-			- 4	-	-	-		-	1	- :	1	- -		- -	- -		-	1	-	1	- :	- -	h	-	5	5	
139e	Diseases of the Breast (non-puerperal)	{Е. О.	-	-	=	-	-	-	-	-	-	-	-	=	-	-	-	-	- :		- -				_	-	1	-	-			-	-	j -	-	

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513	139d	X. (cont.). Other Diseases of the	∫ E.	g. –	-	-	-	E	-	-	-	-	-	F	-	-	-	-	-	A	E	-	-		A	A]	1	A	A	AF	F	-	-	-	-
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551	141	Abortion—not returned as septic) to.	D.			-	-			-	-		-	-	-	-	-	-	-		_ .			- -		1		- -	- -			-	=	-
552	142	Ectopic Gestation		g. -	-	-	-	-	-	E	-	=	-	-		-	- 1	-	-2	-	-1	-	-	A.		- -	_ -		- -	- -	1	-4	-4	E	-
553	143	Other Accidents of Pregnancy	ĮξE.	g	. _	-	-	-	-	=	-	-	-	-	-		-		-	_	-		_	_ -		- -	_ -	- -	- -	_ _	-	4 - -		=	-
554	144 a b	Puerperal Haemorrhage	ĮξE.	E	=	=	E	-	-	-	=	1	13	-	-	-	-	-	- 2	=	- 1				- 1	- -			_ _		-	-3	-3	=	E
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557	147	and Convulsions Other Toxaemias of Pregnancy	ξĒ.	O. - E. -		-	-	-	-	-	-	=	-	-	. _	_	1 - 2	-	-	-	1 -	~		- -	_ .	- -	_ _	_ -	- ()-	- -	-	3	-	=	1 -
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559	149	Sudden Death Other Accidents of Childbirth	E.	E	-	-	=		-	-	=	=	=	-		-	1	- - -	- 1	-	2 3		1	- -			- - - -				-	4 5	- 4 5	E	- - 1
560	150	Other or Unspecified Conditions of the	$\left\{ \left\{ \mathbf{E}.\right\} \right\}$	E. –	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-		A)					-	-	-	-	-
561	150	Puerperal State Puerperal Diseases of the Breast	{ Co. } E.		- -		-	-	-	-		-					- -	-	-	-	- - -	-	-		- -		- - - :			- - - -	-		1	-	-
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601	152	Ccllulitis— Acute Abscess		E. –	-		- 1	1 -	-	-		-1 -	Æ		13	F	-	 - 	- 1		-	1 1	-	1	1	-1	E				1	2 2	4	1-,	2
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650	154	OF LOCOMOTION. Acute Infective Osteomyelitis and Pcrio-	o- { E.	Е. –		-	4	1			1 -		-	1-	4	F	1-	-	-	-	-	-	-			A		-				1 -	1	-	-
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	X. (cont.). Other Diseases of the Female Genital Or-	{ E. O.	<u>'</u>	F. -		F.	M.	F.	M. -	F	M. -	F.	м. -	F.	M. -	F	M. -	F	M.	F.	M.	F.	M	F	M.	F. - -	M.	F	M.	F. -	M. 	F.	M.	F.	M.	F.	
	gans Totals for X XI. DISEASES OF PREGNANCY AND PUER-	{E. O.	12	7 2	3	1 2			3 4	8 3	1	2 1	2 5	1 9			-6 7			1 3	3		5 8	- 1	10	1 5	4 5	2 8	5 5	5 4	ε 6	6 7	2 2	2	66 65	49 57	115 122
140	PERAL STATE. Post-Abortive Sepsis	{E	-	-	-	=	_	_	-	-	-	-	_	-	_	_	=	_	-	-	_	_	-	_	-	-	- 1	-	-		-	-	-	-	-	-	-
141	Abortion—not returned as septic	E O	-	=	=	=	_	-	_	=	-	_	-	-	-	-	=	-	-	-	-	_	-	-	-	-	_	-	-	_	-	_	-	-	-	-	-
142	Ectopic Gestation	{E.	-	-	_	_	-	_	= }	1	_	-	-	-	_	-	-	-	-	_	-	1	_	1	-	1	_	= (-	-	-	-	-	=	-	4	4
143	Other Accidents of Pregnancy	{E.	-	-	-	=	-	<u>-</u>	-	=	_	_	_	-	-	_	=	-	_	-	-	_	-	=	_	=	_ \	-	-	-	-	-	-	-	-	-	-
144 a b	Pucrperal Haemorrhage	{E, O,	-	-	-	=	_	Ξ	-	=	_	_	_	-	_	2	_	-	=	_	-	_	_	-	-	_		-	-	-	= }	-	_	-	-	3	3
145 a b	Puerperal Sepsis	{E.	-	-	-	-	_	-	-	-	-	-	-	-3	-	_	-	-	_	$\begin{array}{ c c }\hline 1\\ 2 \end{array}$	-	=	-	1	-	2	_	-	-	-	_	-1	-	1	-	12 12	12 12
146	Puerperal Albuminuria and Convulsions	E.		-	-	-	-	-	-	-	-	-	-	-	-	1		-	=	<u>-</u>	-	-	-	1	-	-	-	2	-	-	-	-	-	-	-	1 3	1 3
147	Other Toxaemias of Pregnancy	E C		-	-	=	_	_	_	-	-	-	_	1	-	-	=	-	=	_	-	-	-	_	-	-	-	-	-	_	-	1	-	=	-	2	2
148 ab	Puerperal Phlegmasia —Alba Dolens and Sudden Death	\\ \{\begin{align*} \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		-	-	-	-	-	-	-	-	-	_	-	-	-	_	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
149	Other Accidents of Childbirth	{E.	-	_	γΞ	-	-	_	-	- 1	_	-	_	_	-	- 1	_	-	_	_1 	-	_1	-	- 1	-	- 1	-	1 1	-	_1	-	-	-	-	-	5	4 5
150	Other or Unspecified Conditions of the Puerperal State	{ E. O.		-		-	-	-	- -	-	-	-	-	- -	-	1	-	-	-	-	-	-	-	-	-	-	-	- -	-	-	-	_	_	<u>-</u>	-	1	- 1
150	Puerperal Diseases of the Breast	{E. O.	-	-	-	-	_ _	-	=	-	-	- -	_	- -	-	-	-	-	-	=	-	-	-	-	-	_	-	-	-	-	-	-	-	-	_	-	-
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151	XII. DISEASES OF THE SKIN AND CELULLAR TISSUE. Carbuncle	∫E.		1		-	_	_	_		_	_		_	_		-	_	_	_	_	_	_	_	_	_	_		_	_	_	_	-	-	-	1	1
152	Cellulitis—	ξ E.	_	-	-	_	_	_	_	_	_ _	-	-	-	_	-	1	-] -	_	- 1	-	-	_	1	1	-	_	-	_	-	1	_	- 1	2	2	4
153	Acute Abscess Other Diseases of the	ξ ō.	_	-	-	-	_		_	-		-	_	-	_ _	-	-	-	_	_	-	_	_	_	-	_	_ 1	- -	_	-	-	-	_	-	3	-	6
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154	XIII. DISEASES OF THE BONES AND ORGANS OF LOCOMOTION. Acute Infective Osteo- myelitis and Perio-	ξE.		-	-		-	-	_	_	-	_	_				-	-	_	_			_		-	-			1	-			<u>-</u>	-	1	-	9
155	other Diseases of the	CE.		-	1 _	_	_	_ }	_	_	_	_ '	1	_	_	- T	_	_	_	_	_	_	_	_	- 1	_	_	-	_	-	_	1	_	_	1	1	2
156a	Bones Disease of the Joints	\ \{ E. \ 0.	_	-	-	-	-	-	-	-	-	_	_	_	_	-	-		-		- - -		-	-	-	-	-	-	_	-	_	-	-	-	-	1	1 - -
156b	Disease of the Other Organs of Locomo- tion	{ E. O.	-	-	-	-	-	-	~	-	-	-	-	-	_	-	-	-	-	-	-	-	-	-	-		-	-	-	-	-	-	-	-	-	-	-
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157a	XIV. CONGENITAL MALFORMATIONS. Congenital Hydrocephalus	{E. (0.	_	-				-	-	_	-	_		-	_	_			-	_		_	-	_		_	_	_	-	-		_	-	-	- 1	-	1
157b	Spina Bifida and Meningocele	{Е. О.	_	-	-	-	-	-	-	-	-	-	_	- 1	-	-	-	-	_	-	-		-	_	-	-	-	-	_	-	-		-	_	-	- .	1
157c	Congenital Malforma-	ξΕ. .{ Ο.	_	 - -	-	-	- \	-	-	-	_1	-	1	-	-	- 2	2	-	-	_	-	1	3	_	-	-	-	1	-	_	1	-	-	1	7 3	3 4	10 7
157 de	Other Congenital Malformations	{E. (O.	_	-	- 1	_	- 1	-	2	-	_1	-	-	-	-	-1	-	-	-	-	-	-	-	1	1	_	- 1	- 1	_	-	_	-	_	-	2 5	1 3	3 8
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158	XV. DISEASES OF	{Е. О.		-	-3		-	-	- 1	1	1	-	- 9		- 2	-	-	- 1		_		1 1	-	- 2	1	_	-	- 2	- 2	- 1		- 1	_		2	2 11 2	4
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753	161	XV. (cont.). Other Diseases peculiar to Early Infancy	{E. O.	3 9		-	-	_	-	3	8 5	_	-	_	_	_	=	= ;	-	-	_	_	_	-	-	-	_	-	-		_	3 9	8 5	14	1 -	2
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871- 875, 882, 883, 895	186, 1	Accidental Injury other than mentioned below	E			-	_	-	1	1	1	-	-	1		2	-	2	1	3	-	-	1	2	1 -	-	- -	-	1	-	-	8	3 3 1	9	2 1 2 -	_
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866	179	Other Acute Accidental Poisoning (Not by Gas)		-	-	-	-	-		-	- 1	-	-	-	-	-	-	-	-	-	_	-	-	-	- - - -	- -	- - - -	-	-	-	-	1		3	- 1 2 -	1
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70	183	Accidental Drowning	{ o		-	1	-	= =	1	_	-1	_1	_1	-	1	- -	-	_	_	_1	= =	-	-	1	_1 _	-	_	= :	- -	_ _	5 3	1 6 1 4
76- 81	186	Accidental Injury by Railway, Road and Other Transport	$\left\{ \begin{bmatrix} \mathbf{E} \\ \mathbf{O} \end{bmatrix} \right\}$		-	2	-	_ -	3	-	-	1	3	-	-	- (3 :	1 5	1	3	1	5 -	3	-	3 -	1 0	-	1	2 -	-	39	6 45
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	193	Electricity (Lightning Excepted)	10). –	_	-	-		-	-	=	-	1	-	-	- -	1-	=	_	-		\\ <u>-</u>	-	-		-	-		- -	-	1	- 1
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	194	Killed in Riot	$\left\{ \left\{ \left\{ \left\{ \right\} \right\} \right\} \right\} \right\}$		-	-	-		_	_	=	=	_	-	_	= =	-	=	=	-		1-	-	_		-	_			-	<u> </u>	
396	195	Violent Deaths of Un- stated Nature (Open Verdict)	L {		-	-	-		-	-	-		-	-	-	1-	-	-	-	-		1	-	-	- -	-	-		-	-	- 11	- -
397	196	Wounds of War			-	-	-	-1-	-	-	-	-	_	-		- -	-	-	-	-		-	_	-	- / -	-	-	- -	-	-	-	_ _
398	197	Execution of Civilians	SE	i. –	-		-/	_ _	_	-	_	-	_	-	_	- -	-	-	-	-		-	_	-		_	_			-	-	- -
399	198	by Belligerent Armies Judicial Execution	SE	i. –	_		-		_	_		-	_	_	_		-	_	_	_		-	_	_	_ _	_	_	_ _	_	_	_ .	
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A CACACA CACACA		WARDS.		1. Sea Point	2. Harbour	3. West Central	4. Kloof	5. Park	6. East Central	7. Castle	8. Woodstock	9. Salt River	10. Mowbray	11. Maitland	12. Rondebosch	13. Claremont	14. Kalk Bay	15. Wynberg	Not Allocated (unascertained addresses).	Total	Excluded from above figures (1) Births in Cape-	did not belong thereto	(2) Langa Location	(3) N'dabeni Location

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	n Rates co ard and O Transfers.	Natural In- crease Rate.				111 111 111 111 112 113 113 114 115 115 115 115 115 115 115 115 115
Rates	pean R nward Trai	Death Rate.				10 .73 10 .98 10 .93 10 .32 10 .32 9 .44 11 .13
	Euroj for I	Birth Rate.				222 222:91 22:29:29 20:32 113:01 17:95 16:76
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al St	Infant Mortality Rates.		čD.	66. 84. 64. 85. 64. 65. 65. 65. 65. 65. 65. 65. 65. 65. 65		190 ·62 158 ·59 165 ·59 155 ·80 167 ·74 143 ·27 146 ·18
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	lst Jul			(2) 2 Years and 296 days (3) Quinquennium		Year
700.762.400]			

(1) From 8th September, 1913 to 30th June, 1914.
(2) From 8th September, 1913 to 30th June, 1916.
(3) The year of the influenza epidemic (1918-19) is excluded, the figures shown being the mean of the other four years of the quinquennium.

The birth rates, illegitimacy rates, natural increase rates and infant mortality rates are uncorrected for the year 1919-20 and previous years, and are corrected for outward tranfers in subsequent years. The figures in italics (1918-19) represent rates of natural decrease.

Death rates from Tuber-culosis (all Forms) per 1,000 persons 3 -38 2-75 3.13 4.82 3.76 4.59 5.24 5.59 4.46 Non-Eur. 0.91 3.66 10.06 4.21 1.14 1.090.86 Bur. 09-0 0.97 0.84 0.68 4-56 1.641.27 0.56 0.57 0.36 0.57 09-0 0.61 Wards of the City, corrected for Non-residents. from Tuberculosis (All Forms). Non-Eur. 63 19 က 104 629 20 27 72 38 12 22 49 19 82 30 90 Deaths 4 00 \vdash 11 ∞ 4 18 19 ∞ 70 4 1 4 0 ಣ 12 126 Eur. 122 - 45 21-74 118-12 37 - 04134.97 154.64 179-49 120.01 126-24 165 - 22159.01 137-66 146.18 140 -88 180 - 17 116.50 Non-Eur. Infant Mortality (per 1,000 Births). 5 -66 52-63 51-18 50 -63 66.12 66.23 68-38 53 -51 31.25 70 -75 51.09 55-17 31 -03 48-54 Bur. 27 Deaths under 1 year of Age. Non-Eur. \vdash 149 18 44 _ 88 19 84 106 6 37 150 51 51 $7\overline{2}$ 45 925 00 S ∞ ∞ $^{\circ}$ 6 16 9 151~ 10 Eur. 10 16 13 \vdash 125 Natural Increase rates per 1,000 Persons. 4-44 10.49 11.83 16.20 20 - 22 22 - 47 39.13 18-21 28-09 18.85 17 - 74 32 -80 16.1414.04 27-06 21 - 09Non-Eur. 1.46 7.39 1.95 99-6 10-26 7 -03 4-70 6-47 5.63 0 -20 10.54 4.06 15-63 12 - 244.81 Eur. Natural Increase (Excess of Births over Deaths). 157 16 436 387 193 148 2,978 59 86 30 53 323 397 Non-Eur. 224 156350 -37 9 6 Bur. 4 2 23 23 $-I_{\mathcal{D}}$ 830 71 22 158 58 136 52 150 32 95 147 20 - 79 15.65 18.0219.60 8.64 24 - 7618.89 25.27 12.82 29-92 25.42 rates 1,000 Persons. 3 -33 -57 24.89 53-34 .73 Non-Eur. 22 23 separate Death 11.40 8 -99 14 - 3112.65 8 - 32 10.89 14.34 9.41 9.38 8 - 73 2-69 11-42 10.6711.13 •08 10.83 Eur. 33 135 Non-Eur. 11 88 131 169 16534 358 206 275 477 295 3,350 180 62 373 40 Deaths. the Eur. 180 47 17 122 98 80 29 157 92 140 71 159 42 1,639 141 13485 61Illegitimate
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municipality. in Table J on page 136) but inclusive, so far as the European population is concerned, of population in the Harbour and A. These figures refer to European births and deaths belonging to Capetown, but which occurred outside the municipality.

B. Exclusive of all figures relating to the native locations of Langa and N'dabeni (which are shown separately in Table J on page 136 Shipping and residents enumerated on trains.

C. Exclusive of the 27 European births (inward transfers), in regard to which information as to the legitimacy is not available.

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	ulity or sfers).	All Races.		119 ·611	•	119.65	95.91	196.27	235 -59	116.8	:	•	59.0	57.0	and and
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es for	D (Cc Outwa	Euro-		10 -84	77. 6	9 .82	8 -63	9 -24	8.9	8 .00	11 ·3	10.0	:		³ Stand ' 6 Asiat
Statistic Rates for	ates.	All Races.	:	18 -71	•	:	:	20.42	23.95	•	:	•	11 ·8	12.2	
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of Pri	Illegitimate Births, Percentage of Total Births (Corrected for Outward Transfers).	Non- Euro- pean.	:	21 .90	•	9.64	31 .27	48.83	38.68	18 -11	•	•	•	:	Eurafricans or Coloured only.
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rative	ss for sfers).	All Races.	:	30 .40	•	28.42	21.74	28 .97	20.81	19 .68		•	14.81	13 -41	
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on	Tuberculosis, Respiratory System.	F	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	467	41 28	42	zal nia.		듇	H 674 000 H 001 100 H 01	37	1 1	1 1	
cati	ubercrator	O. H.	201100110011001100110011001100110011001	464	∞ l & l.∞ l	45	Influenzal Pneumonia	0	M.	1 1 8 2 1 8 9 1 9 8 2 1 7 1 1 1	1 45	1 1	1	
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	•	* 2 2 2		:	ide Muni- n Overseas ses removed Municipal Municipal			ctc.			•	Innucted Cases: Contracted outside Municipalarea area Introduced iron Overseas Direct Removals (Cases removed to lospitals in Municipal	Municipal c Docks	·
G		16.y, e	:::::::::::::::::::::::::::::::::::::::	:	de Muni- Overseas ses removed Municipal Municipal		1000	ity, c		:::::::::::::::::::::::::::::::::::::::	* *	ic Mu Ses re	Mur ne Do	ases
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LABLI		ol cite	Point Cent Cent Strock River Tray and a book on the Bay werg arted	cal C	Cases: cted out area iced fro novals(C) nitals in outside	Imported		of t		Sea Point Harbour Harbour Kloof Park East Central Castle Woodstock Salt River Mowbray Maitland Rondebosch Claremont Kalk Bay Wynberg Allocated	ocal	Case thed control noval spital	outside ships in t	nport
I	1		Sea Point Harbour West Central Kloof Fark Fark Gastle Woodstock Salt River Mowbray Maitland Rondebosch Claremont Kalk Bay Waynberg	Totals, Local Cases	Contracted outsi cipal area Introduced from piret Removals (Cas to hospitals in area): From outside area): From shins in the	ls, II		Wards of the C		Sea Point Harbour West Central Kloof East Central Castle Woodstock Salt River Mowbray Maitland Rondebosch Claremont Kalk Bay Wynberg	Totals, Local Cases	Innocred Cases: Contracted outside area Introduced from Direct Removals (Case	From outside Municip arca From ships in the Docks	Totals, Imported
	1	wards	1.9.6.4.7.0.0.0.0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	Tota	Imported Cases: Contracted outside cipal area Introduced from O Direct Removals (Cases r to hospitals in Mu area): From outside Mu area area area area area area.	Totals,	7.01.00	H		110.98.7.6.9.9.19.11.11.11.11.11.11.11.11.11.11.11	Tota	In In Direct	H	Tota
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S.	Infective Encephalitis.	0. M.	11111111111111				M	144 100 100 100 100 100 100 100
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-Notification	Tuberculosis, Other Forms.	0. M.]	2011000001011111	88 7		ızal onia.	To- tal.	2 1 1 1 1 1 1 1 1 1
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TABLE	Tuberculosis, Respiratory System.	0				Acute Anterior Poliomyelitis.	F. ta	111411111111111111111111111111111111111
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				<u> </u>				14100011111111
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		Age-Groups		Totals			Age-Groups	1 year
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	E CONTRACTOR		7					11000000

Table I.

NOTIFICATIONS OF INFECTIOUS DISEASE FOR A SERIES OF YEARS, CLASSIFIED AS TO RACE.

Propension Pro	-L-1	01211011									2 %	J. 11	,							
Secondarian of Personal Program Personal Progra	Diseases.	Race.	_	_				_				_				_	_	_	-	_
Complete of the complete of	Scarlatina or Scarlet Fever		97	153	274	224	97	47	26	50	129				2 60	425				
Principal Feron No. 15	Diphtheria or Membranous Croup.																			
Purposent Prever Non-K 13 7 10 5 6 6 10 12 14 24 34 30 30 30 30 38 41 30 50 Purposent Prever Non-K 12 3 8 10 10 11 11 12 3 10 10 10 10 10 10 10	Enteric or Typhoid Fever																			
Ophthalmin	Erysipelas					27 5														
Corebrospinal Pewer Son. R. 1 28 29 22 25 50 101 113 130 122 208 27 100 218 100 205	Puerperal Fever																			
Part	Ophthalmia																			
Problemyelitis Non-E 2 2 3 3 3 3 3 3 3 3				5 5	4 5	3			3 2											
Property Property				2 2					1		_			1		5		4	3	14
Typhus Pever Non-E. 1							1			6 5			8 3	5	3			2 4		
Smallpox Shar, Non-E. -	Leprosy	Non-E.		1 -			3		4		· K	1	1	4	3	1	4	2	2	1
Influenza Non-E Sur. Sur. Non-E Sur. Non-E Sur. Sur. Non-E Sur.		Non-E.				=		1	E		3				l .		4		1	
Pneumonian Non-E. Ser.		Non-E.		1			=		_		_					_	_			
Influence Non-E Pure Pure Non-E Pure		Non-E.						2												
Preumonia Non-E. Ser.	all forms*	Non-E.																10	10	
Pneumonia Non-E. Image: Control of the control of the	Pneumonia	Non-E.							13	52	61	63	121	78	80	38	91	31	31	82
Plague Non-E. C <th< td=""><td>Pneumonia</td><td>Non-E.</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></th<>	Pneumonia	Non-E.																		
Anthrax Eur. Non-E	Cholera		1	=	=	E	=		_		=	_								
Clanders Clanders	Plague				=		_		_	_	=	_								
Rabies Non-E. — <th< td=""><td></td><td>Non-E.</td><td></td><td>=</td><td></td><td>1 —</td><td>_</td><td>1</td><td>=</td><td>_</td><td>=</td><td>_</td><td>_</td><td>1 —</td><td></td><td></td><td></td><td></td><td>1</td><td></td></th<>		Non-E.		=		1 —	_	1	=	_	=	_	_	1 —					1	
Malta Fever Eur. Non-E. —		Non-E.			1					1		_		_			=			
Yellow Fever Eur. Non-E. — <td></td> <td>Non-E.</td> <td></td> <td>_</td> <td></td> <td></td> <td>_</td> <td></td> <td></td> <td></td> <td></td> <td>_</td> <td>_</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>		Non-E.		_			_					_	_							
Trachoma Eur. Non-E.		Non-E.	1	=	1	_	$-\frac{2}{-}$		=		1	_		_		1			-	
Lead Poisoning Eur. Non-E. 103 104 103 553 502 526 495 447 531 132 194 146 174 175 568 572 533 689 794 823 911 911 1,049 1,015 1,002 931 185 161 102 143 148 181 134 168 165 203 163		Non-E.			E	_			<u> </u>			_	_				_	_		
Tuberculosis, Respiratory System Non-E. Sur. Non-E. Su		Non-E.										3 3		12 12	23			6	1	
all forms* Non-E. 553 502 526 495 447 531 Signature		Non-E.	_		7.66	7.7.	100	100							5	$\frac{3}{1}$		1		<u>-</u>
spiratory System Non-E. 568 572 533 689 794 823 911 911 1,049 1,015 1,002 931 Other Forms of Tuberculosis Eur. Non-E. 10 16 28 28 28 27 35 19 30 21 21 20 Tuberculosis Non-E. 75 71 116 102 143 148 181 134 168 165 203 163	all forms*	Non-E.							100	10.4	140	154	102	0.00	100	100	200	910	105	161
Tuberculosis Non-E. 75 71 116 102 143 148 181 134 168 165 203 163	spiratory System	Non-E							568	572	533	689	794	823	911	911	1,049	1,015	1,002	931
From 1916/1917 to 1918/1919 corrected for imported cases.	Tuberculosis	Non-E		19 000	reated	for i	mport	ad one	75											

From 1916/1917 to 1918/1919 corrected for imported cases.

From 1919/1920 to 1926/1927 corrected for imported cases and misdiagnosis.

From 1927/1928 to 1934/1935 corrected for imported cases and misdiagnosis: (including Wynberg Ward).

* Not separately classified until 1923-1924.

† 1st July—18th December, 1931.

		13).	esth Rate iberculosis forms, per 000 persor	'I	5.71	-54			sal es.	F.	23	35
		Tol	(1 5 7 13	-1			Total Cases.	M.	46	61
			ths Tuber s (all as).	두					hal-	F	81	2
			Deaths from Tuber-culosis (all forms).	M.	17	22			Ophthal- mia.	M.	61	2
		Infant		Births).	155.6	136.0			Puer- peral Fever.	<u>F</u>	н	1
		- H		<u> </u>	9 1				e y nia.	된.	e	3
			Deaths under one year of age.	<u>F</u>	10 01	7 10			Acute Primary Pneumonia.	M.	c1 c1	4
ENI.				M.					al ia.	<u></u> 년	-	
N'DABENI.		Death	rate (per 1,000 per-	sons).	19.98 23.55	21.12			Influenzal Pneumonia		<u> </u>	
	Natives.			<u> </u>	17 11 11 2	862			Inf Pne	M.		
AND	NAT		Deaths.		90	9			Acute Anterior Polio- myelitis.	된.		22
3A			Ď	M.	46	56	<u>ы</u>			M.	-	_
LANGA		io io	gitimate Bir Percentage Total Birtl	I	16.7	19.2	Infectious Disease.		Leprosy.	Fi		
OF I							DE			M		-
		Birth		sons).	28 · 54 39 · 24	31.42	FIOUS		Typhus Fever.	뇬		
CATIONS			Still Births		9 1	1-	FEC	Natives.		M.	2	22
OCA			Total.		35	125	1 1	ž	Erysipelas.	듇	.	
E LO			fti-	Fi	က ထ	=	ON O	1	Erys	M.	-	н
NATIVE		Births.	Illegiti- mate.	M.	30	13	Notification of		Scarlet Fever.	됸	61	62
		Щ	iti-	드	38	56	TIFI		Scarlet Fever.	M.	11	
THE			Legiti- mate.	X.	37	45	Ň		Diph- theria.	F4	. 1	-
1 OR	Ø	.l.	stoT bnær	e	3,162	3,989			Diph. theria.	M.	10	က
SS	onth		otal.		3,146 3	3,956 3			Enteric Fever.	됸	٦	-
STI	12 m 1935.				844 3,					M.	4 1	5
STATISTICS FOR THE	for the June,	Natives.	nildren.	1		5 1,351			ulosis, ner ms.	Ħ	6161	4
VITAL S	Average Population for the 12 months July, 1934, to June, 1935.	Z	Adults.	M. F.	1,787 515 123 180	1,910 695			Tuberculosis, Other Forms.	M.	5	5
VI	ge Popu July, 1	n.	.lsto	1	16 1,	33 1,			Tuberculosis, Respiratory System.	됸	111	18
	Verag	European.	lts.	Fi	01	19			Fuberculosis Respiratory System.	M.	& & &	36
	A	Em	Adults.	M.	7-1-	14			——————————————————————————————————————			<u> </u>
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e J			Location.		• •	•			Location.		::	
Table			Loca		: .a	T.			Lo		E	12
T					Langa N'dabeni	Total					Langa N'dabeni	Total
					ZL		1				NE	

In addition to the above, one case of tuberculosis of the respiratory system was notified in the person of a native female who contracted the disease outside the municipal area, being already ill on arrival in Langa Location.

Deaths in Langa Location Hospital, 35 (Natives). Of these 35 deaths, 31 were of males and 4 were of females.

Table K.

BAROMETRICAL READINGS, 1934-1935.

CORRECTED FOR ALTITUDE, TEMPERATURE, INDEX ERROR, CAPACITY AND CAPILLARITY.

Lowest and Date for twenty-eight years, 1st July, 1906, to 30th June, 1934.	13th, 1917. 29th, 1920. 13th, 1907. 6th, 1920. 14th, 1925. 24th, 1926. 4th, 1921. 3rd, 1916. 19th, 1916. 19th, 1916.	13/7/1917.
Lowest for twenty lst July, 190	28.924 29.753 29.694 29.727 29.754 29.002 29.002 29.008 29.089	28.924
Highest and Date for twenty-eight years, 1st July, 1906, to 30th June, 1934.	20th, 1921. 26th, 1921. 8th, 1924. 5th, 1912. 24th, 1912. 13th, 1921. 9th, 1921. 20th, 1923. 3rd, 1923. 3rd, 1923.	26/8/1921
Highest for twenty 1st July, 190	30.709 30.984 30.663 30.563 30.569 30.569 30.945 30.945 30.663 30.663	30.984
Date.	5th 22nd 23rd 21st 18th 24th 28th 8th 13th 2nd 9th 21st	13/3/1935
Lowest.	29.958 30.000 30.036 29.960 29.937 29.958 29.958 29.982 30.054 29.982	29.925
Date	11th 11th 11th 14th 15th 22nd 29th 5th 21st 6th 23rd 27th	11/7/1934
Highest.	30.573 30.546 30.546 30.440 30.327 30.299 30.420 30.420 30.480 30.480	30.573
Average for twenty-eight years, 1st July, 1906, to 30th June. 1934.	30.236 30.276 30.250 30.187 30.187 30.112 30.112 30.232 30.232 30.232	30.205
Mean.	30.330 30.291 30.256 30.207 30.133 30.144 30.149 30.149 30.244 30.330	30.215
		•
		:
Month.	July August September October November December Tebruary February Kapril April April June	Year
11		

		Lowest and Date for 28 years, July, 1906, to 30th June, 1934.		5th, 1907 25th, 1926 4th, 1921 6th, 8th & 20th, 1926	& 1st, 1928 15th, 1924 30th, 1931		outh, 1928 28th, 1928 19th, 1923 4th, 1928	2061/1/9
		Lowest and Day for 28 years, 1st July, 1906, to June, 1934.	To	29.0 35.5 39.8 43.0	44.0	42.2 45.6 46.8	40.8 40.3 36.2	29.0
	ů	Date.		1st 1st 24th 22nd	4th 16th	9th 18th 6th	16th 28th 12th	12/6/35
1934-1935.	ermomete	Lowest.	H o	39.9 40.8 45.0 46.0	49.2	52.2 52.8 50.7	50·1 45·0 37·7	37.7
1934	Minimum Thermometer.	A verage for 28 years, 1st July, 1906, to 30th June, 1934.	0	47 · 419 47 · 096 49 · 743 52 · 814	55.610 61.578	59 · 406 59 · 650 56 · 789	54.253 54.658 48.835	53.988
SHADE,	M	Mean	, FI	46·74 47·62 50·65 53·83	58.00 57.61	59 · 78 60 · 55 56 · 98	56·71 51·13 48·35	54.00
THE SH		Highest and Date for 28 years, 1st July, 1906, to 30th June, 1934.		30th, 1927 24th, 1918 18th, 1925 31st, 1915	25th, 1927 16th, 1916	27th, 1929 14th, 1924 19th, 1927	1st, 1925 3rd, 1932 22nd, 1912	14/2/1924
Z		Highes for lst July, Jun	o F	85.3 90.8 91.9 95.6	100.3	102·3 103·8 101·0	102.9 95.5 85.7	103.8
AIR		Date.		3rd 21st, 31st 17th 30th	15th 19th	27th 3rd 12th	1st 8th 6th	27/1/35
9	ermomete	Highest	0 F	71.8 71.9 85.1 90.7	95.2	99·0 97·9 89·2	87.5 83.8 77.0	0.66
TEMPERATURE	Maximum Thermometer	Average for 28 years, 1st July, 1906, to 30th June, 1934.	10	62.688 63.379 65.939 70.274	74·099 77·312	80 · 442 80 · 561 78 · 704	73.612 68.571 62.074	71.471
PERA	W.	Mean	o F	61.92 62.33 67.01 70.92	74.44	81.35 83.26 74.91	72.57 67.10 64.22	71.47
TEMI		Average for 28 years, 1st July, 1906, to 30th June, 1934.	H.o.	49.836 52.470 55.310 59.027	62·735 65·467	66 · 350 65 · 642 63 · 283	59.839 55.243 52.413	58.968
		Mean at 8 a.m.	-H-0	50.68 57.83 56.20 61.39	65.42 66.29	67·46 67·95 62·58	61.43 54.90 53.33	60.45
Table L.		Month.		July August September October	November December	1935. January February March	April May June	Year

							- 201-+00-			
					RAINFALL.	· r			HUM	HUMIDITY.
Month.	Amount	Average for 28 years in inches, 1st	No. of	Average rainy days for 28 years.	Greates	Freatest Fall in one day	Greatest F 28 years to 30th	Greatest Fall in one day for 28 years, 1st July, 1906 to 30th June, 1934.	Mean	Average for 28 years,
	Inches.	July, 1906 to 30th June, 1934.	Days.	1st July, 1906 to 30th June, 1934.	Amount in Inches.	Date,	Inches.	Date.	Saturation 100.	18t July, 1906 to 30th June, 1934.
1934.	2.24	3.34	10	14.00	99.0	5th	2.67	26th, 1920	79.52	83.88
August	$\cdot \begin{vmatrix} 2 \cdot 06 \end{vmatrix}$	2.95	11	14.00	0.34	4th	1.90	8th, 1909	84.29	84.33
September	. 1.75	2.12	10	11.72	0.11	25th	1.45	17th, 1911	80.70	80.21
October	. 1.84	1.30	13	8.55	0.55	20th	1.55	6th, 1931	89-69	74.24
November	89.0	1.09	7	7.10	98.0	18th	2.35	13th, 1923	71.50	71.16
December	. 0.24	98.0	2	69.9	90.0	14th, 15th & 25th	1.61	18th, 1920	28.99	68.30
January	0.49	0.49	2	3.69	0.17	20th	06.0	21st, 1914	63.71	68.64
February	. 0.12	0.53	c3	4.17	0.10	19th	96.0	11th, 1932	64.11	72.82
March	0.88	29.0	∞	5.55	0.37	4th	1.08	27th, 1910	88.35	73.27
April	. 2.49	1.62	6	00.6	1.48	$27 \mathrm{th}$	1.61	5th, 1912	09-22	81.31
•	3.48	2.70	10	12.00	98.0	24th	2.76	19th, 1911	81.48	82.97
June	1.12	3.65	6	13.59	0.30	21st	2.35	14th, 1909	77.33	27.18
Year	. 17.39	21.32	101	90.601	1.48	27/4/1935	2.76	19/5/1911	75.43	77.16

Mondh. Range at one Range at one in the institution one food. Range at two many flows. Range at flows. Anny flows. <th>Table</th> <th>z </th> <th></th> <th></th> <th></th> <th>П</th> <th>EARTH TE</th> <th>TEMPERATI</th> <th>ATURE, 1934</th> <th>1934-1935.</th> <th></th> <th></th>	Table	z				П	EARTH TE	TEMPERATI	ATURE, 1934	1934-1935.		
ist 1934. 60.8 to 64.0 49.2 to 64.0 57.4 to 61.1 54.0 to 61.3 53.0 to 57.5 53.0 to 62.0 ist 60.2 to 61.8 50.9 to 61.8 58.1 to 61.2 53.8 to 61.7 55.0 to 65.7 55.0 to 65.7 55.0 to 65.7 55.0 to 65.5 57.0 to 65.5 57.0 to 65.5 57.0 to 65.5 57.1 to 75.9 67.1 to 65.7 55.0 to 65.7 60.1 to 65.5 57.0 to 65.5 57.0 to 65.7 55.0 to 65.7 60.1 to 65.5 57.0 to 65.5 57.0 to 65.5 57.0 to 65.5 57.0 to 65.7			Month.				Range at one foot.	Range for one foot, 28 years, 1st July, 1906, to 30th June, 1934.	Range at two Feet.	Range for two feet, 28 years, 1st July, 1906, to 30th June, 1934.	Range at four feet.	Range for four fe 28 years, 1st July, 1906, to 304 June, 1934.
set <td>July</td> <td>:</td> <td>1934.</td> <td>:</td> <td>:</td> <td>:</td> <td>60·8 to 64·0</td> <td>49.2 to 64.0</td> <td>57.4 to 61.1</td> <td>54.0 to 61.3</td> <td>53.0 to 57.5</td> <td>53.0 to 62.9</td>	July	:	1934.	:	:	:	60·8 to 64·0	49.2 to 64.0	57.4 to 61.1	54.0 to 61.3	53.0 to 57.5	53.0 to 62.9
61.9 to 65.1 50.9 to 67.2 61.7 to 65.7 55.0 to 65.7 60.1 to 65.5 55.0 65.0 to 68.3 57.1 to 75.9 65.0 to 71.3 58.0 to 72.5 60.1 to 65.5 57.1 to 75.9 68.9 to 73.1 59.3 to 83.0 71.5 to 75.9 60.5 to 79.7 70.1 to 76.2 67.1 to 76.9 73.3 to 76.6 63.0 to 83.8 76.0 to 78.8 60.5 to 80.5 75.2 to 79.3 67.2 to 79.4 60.5 to 80.5 75.2 to 79.4 70.1 to 76.2 75.2 to 79.3 75.2 to 79.6 75.2 to	August	:	:	:	•	:	60.2 to 61.8	50.9 to 61.8	to	50	55.0 to 60.0	55.0 to 62.0
65.0 to 68.3 57.1 to 75.9 65.0 to 71.3 58.0 to 72.5 63.2 to 73.8 73.1 to 75.9 65.0 to 71.3 68.9 to 73.8 70.1 to 76.2 68.9 to 73.9 70.1 to 76.2 68.9 to 73.9 70.1 to 76.2 70.1 to	September	:	:	:	:	:		to 67	to	2	to	57.0 to 65.5
68.9 to 73.1 59.3 to 83.0 71.5 to 75.9 60.5 to 79.7 70.1 to 76.2 70.1 to 79.3 70.1 to 76.2 70.1 to	October	:	:	:	:	:		to 75	to	to	ţo	20
aber 73.3 to 76.6 63.0 to 83.8 76.0 to 78.8 60.5 to 80.5 75.2 to 79.3 6 ry 1935. 76.8 to 79.1 66.7 to 81.9 77.7 to 81.2 66.8 to 81.2 75.5 to 82.5 6 ry 78.3 to 79.5 66.9 to 86.9 78.0 to 81.4 68.9 to 82.9 74.9 to 81.4 68.9 to 82.9 74.9 to 81.4 68.9 to 82.9 74.9 to 81.4 68.9 to 82.9 74.9 to 81.4 68.9 to 82.9 74.9 to 81.4 68.9 to 82.9 74.9 to 81.4 68.9 to 79.6 65.2 to 79.6 74.9 to 80.2 74.9 t	November	:	:	:	:	:	to	to 83	5	60.5 to 79.7	to	60·8 to 76·2
ry 76-8 to 79-1 66-7 to 81-9 77-7 to 81-2 66-8 to 81-2 75-5 to 82-5 61	Dесеmber	:	:	:	:	:	to	83	76.0 to 78.8	60.5 to 80.5		63.8 to 81.4
ary 78.3 to 79.5 66.9 to 86.9 78.0 to 81.4 68.9 to 82.9 74.9 to 81.4 1 69.0 to 78.8 63.7 to 79.2 72.0 to 79.6 65.2 to 79.6 74.9 to 80.2 66.4 to 74.0 58.9 to 76.6 69.0 to 73.0 63.0 to 76.3 71.3 to 74.2 57.1 to 67.1 53.0 to 74.4 61.0 to 69.0 58.0 to 74.6 65.3 to 71.2 54.1 to 59.3 51.2 to 64.1 57.6 to 61.3 56.0 to 66.0 61.6 to 65.1 54.1 to 79.5 49.2 to 86.9 57.4 to 81.4 53.8 to 82.9 53.0 to 82.5	January	:	1935.	÷	:	*	76.8 to 79.1	81	77.7 to 81.2	66.8 to 81.2	75.5 to 82.5	66·1 to 82·5
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	February	•	:	:	:	:		66.9 to 86.9	78.0 to 81.4	68.9 to 82.9	74.9 to 81.4	68.0 to 81.4
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	March	:	•	:	:	:	69.0 to 78.8	63.7 to 79.2	72.0 to 79.6	65.2 to 79.6	74.9 to 80.2	67.9 to 80.2
$\begin{array}{cccccccccccccccccccccccccccccccccccc$:	:	:	:	:	66.4 to 74.0		69.0 to 73.0	63.0 to 76.3		62.2 to 76.1
$\begin{array}{cccccccccccccccccccccccccccccccccccc$		i	:	:	÷	:	57.1 to 67.1		61.0 to 69.0	58.0 to 74.6	65·3 to 71·2	61.0 to 74.0
54.1 to 79.5 49.2 to 86.9 57.4 to 81.4 53.8 to 82.9 53.0 to 82.5		:	:	:	:	:	ţ		57.6 to 61.3	56.0 to 66.0	6 1.6 to 65.1	59·1 to 67·4
			Year	:	:	:	t t	5	to	53.8 to 82.9	53.0 to 82.5	53.0 to 82.

Table O.						いこのにこれが、これには、これには、これには、これには、これには、これには、これには、これには	1934-1935.	935.			
Month.		Total	Total Hours.		Most in one	Most in one day and date.	Average f 1st July, 1s June,	Average for 28 years. 1st July, 1906, to 30th June, 1934.	lst	Most in one July, 1906,	Most in one day for 28 years. 1st July, 1906, to 30th June, 1934.
		Hours.	Minutes.	Hours.	Minutes.	Date.	Hours.	Minutes.	Hours.	Minutes.	Date.
$\frac{1934}{\text{July}}$:	220	357	6	45	31st	183	39	10	05	24th, 1908
August	:	194	45	10	05	31st	202	30	10	35	29th, 1932
September	•	225	45	11	10	27th	214	36	11	30	15th, 1926
October	:	564	15	12	25	28th & 29th	271	31	13	00	13th, 1931
November .	:	292	30	13	00	26th	291	36	13	25	28th, 1906
December	:	347	35	13	10	17th & 18th	327	41	13	45	5th, 1915
1935. January		354	00	13	05	1st	343	1 4	13	20	11th, 1907
February	:	318	05	12	40	1st	291	98	13	05	6th, 1932
March	:	238	10	11	. 15	7th & 11th	278	33	12	00	4th, 1908 and 1st, 1931
April	:	195	40	10	30	4th	223	က	10	45	8th, 1916, 3rd and 10th,
May	:	213	10	6	45	6th & 8th	199	52	10	00	1926, and 24th, 1930 1st, 1908 and 1st, 1909
June		198	35	6	00	25th & 27th	164	⁰ 05	6	30	5th, 1908
Year.		3.063	05	23	10	17+b & 18+b /19/1024	9 000	000	6	i.	





